



Medi-Cal

Condado de San Diego | July 2022



Promise
Health
Plan

Asistencia en distintos idiomas

English

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

الشعار بالعربية (Arabic)

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

Հայերեն (Armenian)

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

ប្រាសាទកម្ពុជា (Cambodian)

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

中文 (Chinese)

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

فارسی Farsi

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

भाषा (Hindi)

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



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

Hmoob (Hmong)

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

日本語 (Japanese)

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

한국어(Korean)

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

ພາສາລາວ (Laotian)

ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ຍັງມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະ ມີໂຕໂມມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mienh (Mien)

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

ਪੰਜਾਬੀ (Punjabi)

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



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Русский (Russian)

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

Español (Spanish)

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

Tagalog (Tagalog)

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

ภาษาไทย (Thai)

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

ภาษาไทย (Ukrainian)

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

Tiếng Việt (Vietnamese)

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



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A. Introducción

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

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

Cómo cambiar de PCP

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

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

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

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



Member: JOHN DOE
Member ID: AAA173456789

CIN: 123456789
Health Plan Group # 50001001

Effective Date: MM/DD/YYYY

www.blueshieldca.com/promise

Customer Care (855) 899-5567 (TTY: 711)
Provider Services (800) 468-9935
Transportation (800) 433-2178
Nurse Help Line (800) 469-4166
Behavioral Health (855) 321-2211 (TTY: 711)

Information
Information Line 2

PCP Name _____
Phone Number _____
1234 Street _____
City, ST _____
Zip _____

The member has limited knowledge of certain services and/or as needed for **COVID-19**. This card is to help members get services, and also to help providers get services. Services provided are provided under the care of Blue Shield of California. This card is provided for informational purposes only. It is not intended to be used as a substitute for medical advice or as a substitute for medical advice or as a substitute for medical advice.

Blue Shield of California's Promise Health Plan is available to members of Blue Shield of California's Promise Health Plan. This card is provided for informational purposes only. It is not intended to be used as a substitute for medical advice or as a substitute for medical advice or as a substitute for medical advice.

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Servicios de farmacia a través de Medi-Cal Rx

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



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

Cómo usar este Directorio

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

Información importante sobre las listas del Directorio

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

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

Divulgaciones y otra información importante

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

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

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



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

Servicios de intérpretes

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

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

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

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

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

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



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

AVISO DE NO DISCRIMINACIÓN

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

Blue Shield of California Promise Health Plan proporciona:

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

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

(800) 605-2556 (Los Angeles)

(855) 699-5557 (San Diego)

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

Blue Shield of California Promise Health Plan Customer Care
601 Potrero Grande Dr., Monterey Park, CA 91755
(800) 605-2556 (Los Angeles)
(855) 699-5557 (San Diego)
TTY: 711



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

CÓMO PRESENTAR UNA QUEJA

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

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

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

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

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

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



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

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

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

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



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Red de proveedores de Blue Shield Promise

Definiciones e información general

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

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

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

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

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

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

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

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

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

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

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



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Indicadores de accesibilidad física en el Directorio de Proveedores

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

E = Sala de exámenes

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

EB = Instalaciones externas

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

IB = Instalaciones internas

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

P = Estacionamiento

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

R = Baño

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

T = Camilla y balanza

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



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Directorio de Proveedores de Blue Shield Promise

Medi-Cal – Condado de San Diego



Explicaciones de los códigos de accesibilidad

P: Estacionamiento

EB: Instalaciones externas

IB: Instalaciones internas

W: Silla de ruedas

R: Baño

E: Sala de exámenes

T: Camilla y balanza



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Cómo leer las listas de proveedores

La siguiente información puede ayudarlo a elegir su PCP.

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

Ejemplo:

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



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Reglas para recibir atención a tiempo

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



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B. Clínicas de salud federalmente calificadas

ALPINE

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

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

After Hours Phone: (619) 662-4100
License number: 090000681
NPI: 1770124315

Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, TMedical Group/IPA: Ihp-san Ysidro Health Center
Website: www.mtnhealth.org
Email:

SAN YSIDRO HEALTH ALPINE PEDIATRICS MED CLINIC

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

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

9AM-5PM

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

BORREGO SPRINGS

BORREGO MEDICAL CLINIC

Provider ID: 185179
4343 YAQUI PASS RD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
License number: 080000651
NPI: 1134144165

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

CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686
1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
License number: 090000660
NPI: 1174164719
Accepting New Patients: Yes
Min/Max Age: 0/120

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

CARLSBAD

TRUECARE

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

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B. Clínicas de salud federalmente calificadas

Website:

Email:

CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax: (619) 397-1161

After Hours Phone: (619)

515-2500

License number:

NPI: 1346480837

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA: Family

Health Centers Of San Diego

Website: www.fhcsd.org

Email:

CHULA VISTA PEDIATRICS

Provider ID: 482034

855 3RD AVE STE 2200

CHULA VISTA, CA 91911-1353

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)

662-4100

License number:

NPI: 1326486861

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: Medical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

Provider ID: 417641

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2325

Fax: (619) 420-0660

After Hours Phone: (619)

515-2325

License number: 550002305

NPI: 1083959464

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H

CHULA VISTA, CA 91911-5823

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)

662-4100

License number:

NPI: 1922051812

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, WMedical Group/IPA: Ihp-san

Ysidro Health Center

Website: www.ihpsocal.org

Email:

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)

662-4100

License number:

NPI: 1326486861

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: WMedical

Group/IPA: Ihp-san Ysidro Health

Center

Website: www.ihpsocal.org

Email:

EL CAJON

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

B. Clínicas de salud federalmente calificadas

CENTRO MEDICO EL CAJON

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

CHASE AVENUE FAMILY HEALTH CTRS INC

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

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

FAMILY HLTH CTR SAN DIEGO-EL CAJON

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

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619) 795-5991
License number: 550003567
NPI: 1134590086
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:

Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
American Sign Language (ASL): No
♿ Accessibility: WMedical
Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email:

LA MAESTRA FAMILY CLINIC INC

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

NEIGHBORHOOD HEALTHCARE EL CAJON

Provider ID: 206272
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751

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

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

B. Clínicas de salud federalmente calificadas

License number: 090000156

NPI: 1760667950

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: WMedical

Group/IPA: Ihp-neighborhood
Healthcare

Website: www.ihipsocal.org

Email:

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD

EL CAJON, CA 92020-5714

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

License number: 550002514

NPI: 1568845741

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

Accessibility: Medical

Group/IPA: Ihp-san Ysidro Health
Center

Website:

Email:

ENCINITAS

TRUECARE

Provider ID: 480243

1130 2ND ST

ENCINITAS, CA 92024-5008

Phone: (760) 753-7842

Fax: (760) 736-8740

After Hours Phone: (760)

753-7842

License number: 080000638

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

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

American Sign Language (ASL):

No

Accessibility: Medical

Group/IPA: Ihp-truecare

Website:

Email:

ESCONDIDO

CENTRO MEDICO ESCONDIDO

Provider ID: 419344

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606

Fax: (858) 634-6918

After Hours Phone: (760)

871-0606

License number: 550001260

NPI: 1023349883

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-8PM

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

WMedical Group/IPA: Borrego

Community Health Foundtion

Website: n

Email:

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax: (360) 462-2752

After Hours Phone: (760)

520-8100

License number: 080000397

NPI: 1598703647

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-12PM

American Sign Language (ASL):

No

Accessibility: WMedical

Group/IPA: Ihp-neighborhood

Healthcare

Website: www.ihipsocal.org

Email:

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (360) 462-2749

After Hours Phone: (760)

520-8200

License number: 080000483

NPI: 1487826772

Accepting New Patients: Yes

Min/Max Age: None

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B. Clínicas de salud federalmente calificadas

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200

License number: 080000397
NPI: 1487826772
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
Accessibility: WMedical
Group/IPA: lhp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604

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

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900

License number: 550000511
NPI: 1437335353
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
Accessibility: Medical
Group/IPA: lhp-neighborhood Healthcare

Website:
Email:

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL

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

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

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900

License number: 080000158
NPI: 1720264641
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes

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B. Clínicas de salud federalmente calificadas

Site Language(s) Spoken:
Cultural Competency: No
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R,
 WMedical Group/IPA:
 Ihp-neighborhood Healthcare
Website:
Email:

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

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

FALLBROOK

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
 1328 S MISSION RD
 FALLBROOK, CA 92028-4006

Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760)
 451-4720
License number: 080000150
NPI: 1982756086
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Cultural Competency: No
Hours: M-SA 8AM-5PM
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, WMedical Group/IPA:
 Ihp-community Health System
Website:
Email:

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619)
 429-3733
License number: 090000119
NPI: 1790718351
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
 9AM-5PM
American Sign Language (ASL):
 No

☞ *Accessibility:* P, EB, E, R,
 WMedical Group/IPA:
 Ihp-imperial Beach Health Center
Website: www.ihpsocal.org
Email:

JULIAN

JULIAN MEDICAL CENTER

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

LA MESA

LA MESA PEDIATRICS

Provider ID: 480827
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
 464-6434
License number: 550000430
NPI: 1033759311

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

B. Clínicas de salud federalmente calificadas

Accepting New Patients: Yes
Min/Max Age: 0/21
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Borrego Community
Health Foundtion
Website:
Email:

LAKESIDE

NEIGHBORHOOD HEALTHCARE LAKESIDE

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

LEMON GROVE

LEMON GROVE FAMILY

HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax: (619) 825-9577
After Hours Phone: (619)
515-2550
License number: 550001268
NPI: 1427282466
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 9AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E,
TMedical Group/IPA: Family
Health Centers Of San Diego
Website:
Email:

NATIONAL CITY

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619)
515-2399
License number: 550000465
NPI: 1417409228
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No

Hours: M,W,F 8:30AM-3:30PM,
TU,TH 10:30AM-5:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
TMedical Group/IPA: Family
Health Centers Of San Diego
Website: www.fhcsd.org
Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619)
434-7308
License number:
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
WMedical Group/IPA: La
Maestra Family Clinic
Website: www.lamaestra.org
Email:

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

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B. Clínicas de salud federalmente calificadas

Phone: (844) 200-2426
 Fax: (619) 474-3919
 After Hours Phone: (844) 200-2426
 License number: 090000183
 NPI: 1801907449
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken: Tagalog, Lao, Spanish
 Cultural Competency: No
 Hours: M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM
 American Sign Language (ASL): No
 ♿ Accessibility: WMedical
 Group/IPA: Operation Samahan
 Website: www.operationsamahan.org
 Email:

OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302
 2101 GRANGER AVE
 NATIONAL CITY, CA 91950-6208
 Phone: (844) 200-2426
 Fax: (619) 434-8999
 After Hours Phone: (844) 200-2426
 License number: 550002622
 NPI: 1205134517
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken: Cultural Competency: No
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 American Sign Language (ASL): No
 ♿ Accessibility: Medical
 Group/IPA: Operation Samahan

Website: www.operationsamahan.org
 Email:

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
 1136 D AVE
 NATIONAL CITY, CA 91950-3412
 Phone: (619) 662-4100
 Fax: (619) 336-2323
 After Hours Phone: (619) 662-4100
 License number: NPI: 1003869363
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken: Cultural Competency: No
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 American Sign Language (ASL): No
 ♿ Accessibility: WMedical
 Group/IPA: Ihp-san Ysidro Health Center
 Website: www.ihpsocal.org
 Email:

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418
 2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950-2956
 Phone: (619) 662-4100
 Fax: (619) 259-2807
 After Hours Phone: (619) 662-4100
 License number: NPI: 1598907487
 Accepting New Patients: Yes
 Min/Max Age: None

Site English Spoken: Yes
 Site Language(s) Spoken: Cultural Competency: No
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, WMedical Group/IPA: Ihp-san Ysidro Health Center
 Website: www.ihpsocal.org
 Email:

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428
 330 E 8TH ST
 NATIONAL CITY, CA 91950-2312
 Phone: (619) 662-4100
 Fax: (619) 259-2807
 After Hours Phone: (619) 662-4100
 License number: NPI: 1851757215
 Accepting New Patients: Yes
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken: Cultural Competency: No
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 American Sign Language (ASL): No
 ♿ Accessibility: WMedical
 Group/IPA: Ihp-san Ysidro Health Center
 Website: www.ihpsocal.org
 Email:

OCEANSIDE

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C

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

B. Clínicas de salud federalmente calificadas

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 736-8740

After Hours Phone: (760)

757-4566

License number: 080000240

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Cultural Competency: No

Hours: M-SA 8AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: lhp-truecare

Website: www.ihpsocal.org

Email:

TRUECARE

Provider ID: 480247

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 736-8740

After Hours Phone: (760)

966-3306

License number: 080000531

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-4:30PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: lhp-truecare

Website:

Email:

TRUECARE

Provider ID: 480247

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 736-8740

After Hours Phone: (760)

966-3306

License number: 080000637

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-4:30PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: lhp-truecare

Website:

Email:

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354

Phone: (760) 433-3155

Fax: (760) 736-8740

After Hours Phone: (760)

433-3155

License number: 080000240

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: lhp-truecare

Website:

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

License number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-4PM

American Sign Language (ASL):

No

♿ Accessibility: WMedical

Group/IPA: lhp-vista Community

Clinic

Website:

www.vistacommunityclinic.org

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

License number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

B. Clínicas de salud federalmente calificadas

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

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
License number: 080000745
NPI: 1437245412

Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-vista Community
Clinic
Website:
Email:

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
License number: 080000510
NPI: 1649363375
Accepting New Patients: Yes
Min/Max Age: 0/999
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-vista Community
Clinic
Website: www.ihpsocal.org
Email:

POWAY

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858)
218-3000
License number: 550004321
NPI: 1023518768
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical

Group/IPA: Ihp-neighborhood
Healthcare
Website:
Email:

PAUMA VALLEY

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760)
742-9919
License number: 080000611
NPI: 1407031693
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-4:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, WMedical Group/IPA:
Ihp-neighborhood Healthcare
Website: www.ihpsocal.org
Email:

RAMONA

TRUECARE

Provider ID: 449438
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)
736-6767

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

B. Clínicas de salud federalmente calificadas

License number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

8AM-12PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E,

RMedical Group/IPA:

Ihp-truecare

Website: www.ihspsocal.org

Email:

SAN DIEGO

CITY HEIGHTS FAMILY HEALTH CENTERS INC

Provider ID: 206353

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax: (619) 546-9800

After Hours Phone: (619)

515-2400

License number:

NPI: 1023054004

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, MEMedical Group/IPA: Family

Health Centers Of San Diego

Website: www.fhcsd.org

Email:

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619)

515-2560

License number:

NPI: 1982747671

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, MEMedical Group/IPA: Family

Health Centers Of San Diego

Website: www.fhcsd.org

Email:

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2430

Fax: (619) 578-2410

After Hours Phone: (619)

515-2430

License number: 550002251

NPI: 1588901045

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: Medical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619)

515-2426

License number: 550003108

NPI: 1477953933

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

9AM-5PM

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

TMedical Group/IPA: Family

Health Centers Of San Diego

Website: www.fhcsd.org

Email:

FAMILY HEALTH CTR OF SD-ELM ST

Provider ID: 419167

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619)

515-2520

License number: 550002061

NPI: 1316419070

Accepting New Patients: Yes

Min/Max Age: None

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

B. Clínicas de salud federalmente calificadas

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
American Sign Language (ASL): No
 ☞ *Accessibility:* IB, E, RMedical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax: (619) 794-2696
After Hours Phone: (619) 515-2454

License number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
American Sign Language (ASL): No
 ☞ *Accessibility:* Medical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422
Fax: (619) 269-0053
After Hours Phone: (619) 515-2422
License number: 550003113
NPI: 1235521782
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA 9AM-5PM

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

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax: (619) 501-5814
After Hours Phone: (619) 515-2525

License number: 550002865
NPI: 1952729303
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
American Sign Language (ASL): No
 ☞ *Accessibility:* Medical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org

Email:

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax: (858) 488-1394
After Hours Phone: (619) 515-2444
License number: 080000115
NPI: 1386689701

Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
American Sign Language (ASL): No
 ☞ *Accessibility:* Medical
Group/IPA: Family Health Centers Of San Diego
Website: www.fhcsd.org
Email:

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
License number: 550003099
NPI: 1629456900
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-TH 8AM-9PM, F

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

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

B. Clínicas de salud federalmente calificadas

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

American Sign Language (ASL):
No

♿ *Accessibility: Medical*
Group/IPA: Family Health
Centers Of San Diego
Website: www.fhcsd.org
Email:

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619)
662-4100

License number:
NPI: 1538262092
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
8AM-4PM

American Sign Language (ASL):
No
♿ *Accessibility: P, EB, IB, E, R,*
T, WMedical Group/IPA: Ihp-san
Ysidro Health Center
Website: www.ihpsocal.org
Email:

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 795-9849
After Hours Phone: (619)
255-9155
License number:

NPI: 1336353721

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

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
License number:
NPI: 1780665877

Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Vietnamese, Spanish, Chinese,
Lithuanian
Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility: P, EB, IB, E, R,*
T, WMedical Group/IPA: Ihp-san
Diego Family Care
Website: www.sdfamilycare.org
Email:

LINDA VISTA HEALTH CARE

CTR

Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
License number:
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Vietnamese, Spanish, Chinese,
Lithuanian
Cultural Competency: No
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ *Accessibility: P, EB, IB, E, R,*
T, WMedical Group/IPA: Ihp-san
Diego Family Care
Website: www.sdfamilycare.org
Email:

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619)
515-2300
License number:
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):

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

B. Clínicas de salud federalmente calificadas

No Accessibility: MEMedical Group/IPA: Family Health Centers Of San Diego Website: www.fhcsd.org Email:	Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M-F 8AM-5PM, SA 8AM-2PM American Sign Language (ASL): No Accessibility: WMedical Group/IPA: Ihp-san Diego Family Care Website: www.sdfamilycare.org Email:	Phone: (619) 515-2424 Fax: (619) 501-0627 After Hours Phone: (619) 515-2424 License number: NPI: 1700821303 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M-SA 9AM-5PM American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, MEMedical Group/IPA: Family Health Centers Of San Diego Website: www.fhcsd.org Email:
MID-CITY COMMUNITY CLINIC Provider ID: 233532 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 Phone: (619) 280-2058 Fax: (858) 633-4682 After Hours Phone: (619) 280-2058 License number: NPI: 1962483040 Accepting New Patients: Yes Min/Max Age: 0/22 Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M-F 8AM-5PM, SA 8AM-2PM American Sign Language (ASL): No Accessibility: P, EB, IB, E, WMedical Group/IPA: Ihp-san Diego Family Care Website: www.sdfamilycare.org Email:	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492 1016 OUTER RD SAN DIEGO, CA 92154-1351 Phone: (619) 429-3733 Fax: (619) 628-5550 After Hours Phone: (619) 429-3733 License number: 550001474 NPI: 1215246996 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Spanish Cultural Competency: No Hours: M,F 8:30AM-5PM, TU-TH 8:30AM-8PM, SA 9AM-5PM American Sign Language (ASL): No Accessibility: P, IB, E, R, T, WMedical Group/IPA: Ihp-imperial Beach Health Center Website: www.ibclinic.org Email:	NORTH PARK FAMILY HEALTH CENTERS Provider ID: 416831 3514 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 683-7586 After Hours Phone: (619) 515-2424 License number: 090000469 NPI: 1700821303 Accepting New Patients: Yes Min/Max Age: 0/18 Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M-TH 8AM-5PM, F,SA 9AM-5PM American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, MEMedical Group/IPA: Family Health Centers Of San Diego Website: www.fhcsd.org Email:
MID-CITY COMMUNITY CLINIC Provider ID: 233597 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: (858) 633-4681 After Hours Phone: (619) 563-0250 License number: NPI: 1962483040 Accepting New Patients: Yes Min/Max Age: None	NORTH PARK FAMILY HEALTH CENTERS Provider ID: 206362 3544 30TH ST SAN DIEGO, CA 92104-4120	

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B. Clínicas de salud federalmente calificadas

OPERATION SAMAHAN - MIRA MESA Provider ID: 417101 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 Fax: (858) 578-4417 After Hours Phone: (844) 200-2426 License number: 080000146 NPI: 1871680397 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hours: M-F 8AM-4:30PM, SA 9AM-5PM American Sign Language (ASL): No ♿ Accessibility: WMedical Group/IPA: Operation Samahan Website: www.operationsamahan.org Email:	American Sign Language (ASL): No ♿ Accessibility: Medical Group/IPA: Operation Samahan Website: www.operationsamahan.org Email: OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889 Phone: (844) 200-2426 Fax: (858) 695-9074 After Hours Phone: (844) 200-2426 License number: 550003857 NPI: 1699216622 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM American Sign Language (ASL): No ♿ Accessibility: Medical Group/IPA: Operation Samahan Website: www.operationsamahan.org Email:	Phone: (844) 200-2426 Fax: (858) 695-9074 After Hours Phone: (844) 200-2426 License number: 550002478 NPI: 1699216622 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM American Sign Language (ASL): No ♿ Accessibility: Medical Group/IPA: Operation Samahan Website: www.operationsamahan.org Email:
OPERATION SAMAHAN - MIRA MESA Provider ID: 432308 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007 Phone: (844) 200-2426 Fax: (858) 536-8034 After Hours Phone: (844) 200-2426 License number: 080000146 NPI: 1861933897 Accepting New Patients: No Min/Max Age: 0/999 Site English Spoken: Yes Site Language(s) Spoken: Cultural Competency: No Hours: M-SA 9AM-5PM	OPERATION SAMAHAN RANCHO PENASQUITOS Provider ID: 418535 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889	SAN DIEGO AMERICAN INDIAN HEALTH CENTER Provider ID: 207382 2630 1ST AVE SAN DIEGO, CA 92103-6599 Phone: (619) 234-2158 Fax: (619) 234-0505 After Hours Phone: (619) 234-2158 License number: 090000168 NPI: 1003902917 Accepting New Patients: Yes Min/Max Age: None Site English Spoken: Yes Site Language(s) Spoken: Korean Cultural Competency: No Hours: M-F 8AM-5PM, SA 9AM-5PM American Sign Language (ASL): No ♿ Accessibility: WMedical Group/IPA: Ihp-san Diego

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B. Clínicas de salud federalmente calificadas

American Indian Health Center
Website: www.sdaihc.org
Email:

SAN DIEGO FAMILY CARE

Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
License number:
NPI: 1457724858
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
WMedical Group/IPA: Ihp-san
Diego Family Care
Website: www.sdfamilycare.org
Email:

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
License number:
NPI: 1598308926
Accepting New Patients: Yes
Min/Max Age: 0/120

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health
Center
Website:
Email:

SAN YSIDRO HEALTH CHC - OCEAN VIEW

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

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
License number: 550003882
NPI: 1205477841
Accepting New Patients: Yes
Min/Max Age: 0/120
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health
Center
Website:
Email:

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax: (619) 515-2435
After Hours Phone: (619) 515-2435
License number:
NPI: 1174549232
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-SA 9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, MEMedical Group/IPA: Family
Health Centers Of San Diego
Website:
Email:

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B. Clínicas de salud federalmente calificadas

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

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

SAN MARCOS

TRUECARE

Provider ID: 206426
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)
736-6767
License number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No

Hours: M-SA 8AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, WMedical Group/IPA:
Ihp-truecare
Website: www.ihpsocal.org
Email:

SAN YSIDRO

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
License number:
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Ysidro Health
Center
Website: www.ihpsocal.org
Email:

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619)
662-4100
License number:
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM
American Sign Language (ASL):
No
♿ Accessibility: Medical
Group/IPA: Ihp-san Ysidro Health
Center
Website: www.ihpsocal.org
Email:

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619)
662-4100
License number:
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hours: M-F 8AM-5PM, SA
9AM-5PM
American Sign Language (ASL):
No
♿ Accessibility: WMedical
Group/IPA: Ihp-san Ysidro Health
Center

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

B. Clínicas de salud federalmente calificadas

Website: www.ihpsocal.org

Email:

SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax: (619) 462-5584

After Hours Phone: (619)
515-2555

License number:

NPI: 1508801069

Accepting New Patients: Yes

Min/Max Age: None

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

Hours: M-SA 9AM-5PM

American Sign Language (ASL):
No

Accessibility: MEMedical

Group/IPA: Family Health

Centers Of San Diego

Website: www.fhcsd.org

Email:

VISTA

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

License number: 1851300123

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

American Sign Language (ASL):
No

Accessibility: Medical

Group/IPA: Ihp-vista Community
Clinic

Website:

Email:

VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

License number: 080000328

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

American Sign Language (ASL):
No

Accessibility: Medical

Group/IPA: Ihp-vista Community
Clinic

Website:

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:
Spanish

Cultural Competency: No

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

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, T,

W, MEMedical Group/IPA:

Ihp-vista Community Clinic

Website:

www.vistacommunityclinic.org

Email:

VISTA COMMUNITY CLINIC

Provider ID: 206338

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

License number: 080000002

NPI: 1316501562

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:
Spanish

Cultural Competency: No

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

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, T,

W, MEMedical Group/IPA:

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

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

B. Clínicas de salud federalmente calificadas

Ihp-vista Community Clinic

Website:

www.vistacommunityclinic.org

Email:

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

License number: 080000328

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0/999

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

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

10:30AM-7:30PM, SA 9AM-5PM

American Sign Language (ASL):

No

Accessibility: WMedical

Group/IPA: Ihp-vista Community
Clinic

Website:

Email:

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

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

C. Directorio de proveedores de atención primaria

ALPINE	CENTER	♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM
CERTIFIED NURSE PRACTITIONER		
KAHL, NICHOLAS D Provider ID: 517802 Provider Gender: Male License number: NP95006360 NPI: 1821306598 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.mtnhealth.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM	1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.mtnhealth.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM	ST CLAIR BROWN, TANEN T Provider ID: 517802 Provider Gender: Male License number: 20A17296 NPI: 1487040739 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 Phone: (619) 445-6200 Fax: After Hours Phone: (619) 445-6200 Website: www.mtnhealth.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM
	FAMILY PRACTICE	
TODD, MIKAYLA S Provider ID: 517802 Provider Gender: Female License number: NP95005999 NPI: 1316478092 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH	BAUTISTA, LUIS G Provider ID: 517802 Provider Gender: Male License number: A97270 NPI: 1295712206 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Fresno Community Hospital, St Agnes Medical Center Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.mtnhealth.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No	ST CLAIR BROWN, TANEN T Provider ID: 519480 Provider Gender: Male License number: 20A17296 NPI: 1487040739 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

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

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

C. Directorio de proveedores de atención primaria

Phone: (619) 445-6200
 Fax: (619) 320-3347
 After Hours Phone: (619) 445-6200
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802
 Provider Gender:
 License number: 090000681
 NPI: 1770124315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER

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

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

Website: www.mtnhealth.org
 Email:

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

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

SAN YSIDRO HEALTH ALPINE PEDIATRICS MED CLINIC,

Provider ID: 541825
 Provider Gender:
 License number: 550002514
 NPI: 1770178444
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 2733 ALPINE BLVD STE 200
 ALPINE, CA 91901-2253
 Phone: (619) 445-5664
 Fax: (619) 445-3531

After Hours Phone: (619) 445-5664
 Website: www.syhealth.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: EB, IB, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

MUELLER, LAUREL A

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

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

PEDIATRICS

STENSMAN, LARS M

Provider ID: 517802
 Provider Gender: Male
 License number: A158569
 NPI: 1659638062
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Danish, French, Norwegian, Swedish
 Cultural Competency: No
 Hospital Affiliation:

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103

Phone: (619) 662-4100

Fax:

After Hours Phone: (619) 662-4100

Website: www.mtnhealth.org
 Email:

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

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

PHYSICIANS ASSISTANT

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

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C. Directorio de proveedores de atención primaria

BAISLEY, SHAWN M

Provider ID: 517802
Provider Gender: Male
License number: PA52347
NPI: 1376936120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

SHARPE, NORMA A

Provider ID: 517802
Provider Gender: Female
License number: PA20490
NPI: 1619100237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1620 ALPINE BLVD STE 110
 ALPINE, CA 91901-1103
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

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

BORREGO SPRINGS

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

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

DERMATOLOGY

GREENWAY, HUBERT T

Provider ID: 185179
Provider Gender: Male
License number: C39104
NPI: 1366419004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 4343 YAQUI PASS RD
 BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax:
After Hours Phone: (760) 767-5051
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ZELAC, DANIEL E

Provider ID: 185179
Provider Gender: Male
License number: G85319
NPI: 1891709903
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION

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

C. Directorio de proveedores de atención primaria

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

FQHC

BORREGO MEDICAL CLINIC,

Provider ID: 185179

Provider Gender:

License number: 080000651

NPI: 1134144165

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

BORREGO COMMUNITY
HEALTH FOUNDTION

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

GENERAL PRACTICE

HUOT, JAMES M

Provider ID: 185179

Provider Gender: Male

License number: G83499

NPI: 1033122296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
BORREGO COMMUNITY

HEALTH FOUNDTION

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

SURGERY COLON SURGERY

GOETZ, LAURA H

Provider ID: 185179

Provider Gender: Female

License number: A86535

NPI: 1710941729

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Green Hospital, Scripps
Memorial Hospital Encinitas,
Desert Regional Med Ctr
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax:

After Hours Phone: (760)
767-5051

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

CAMPO

FAMILY PRACTICE

KAUFHOLD, ANNE D

Provider ID: 519686

Provider Gender: Female

License number: A88893

NPI: 1164508073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

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

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

C. Directorio de proveedores de atención primaria

Phone: (619) 445-6200

Fax:

After Hours Phone: (619)
445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ROGERS, MATTHEW W

Provider ID: 519686

Provider Gender: Male

License number: 20A18400

NPI: 1639606130

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ST CLAIR BROWN, TANEN T

Provider ID: 519479

Provider Gender: Male

License number: 20A17296

NPI: 1487040739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-9164

After Hours Phone: (619)

445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ST CLAIR BROWN, TANEN T

Provider ID: 519686

Provider Gender: Male

License number: 20A17296

NPI: 1487040739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax:

After Hours Phone: (619)

445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

FQHC

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,

Provider ID: 519686

Provider Gender:

License number: 090000660

NPI: 1174164719

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH

CENTER

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

SHARPE, NORMA A

Provider ID: 519686

Provider Gender: Female

License number: PA20490

NPI: 1619100237

Provider English Spoken: Yes

Provider Language(s) Spoken:

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

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

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

CARLSBAD

CERTIFIED NURSE PRACTITIONER

LEWIS, SARAH

Provider ID: 480120
Provider Gender: Female
License number: NP22697
NPI: 1437497963
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 1295 CARLSBAD VILLAGE DR
 # 100
 CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760) 720-7766
Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA 8AM-2PM

PALEN, BARBARA A

Provider ID: 480120
Provider Gender: Female
License number: NP3108
NPI: 1265447601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 1295 CARLSBAD VILLAGE DR
 # 100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760) 720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

☯ *Accessibility:*

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

TRUMAN, LAURA L

Provider ID: 480120
Provider Gender: Female
License number: NP19860
NPI: 1376840231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 IHP-TRUECARE
 1295 CARLSBAD VILLAGE DR
 # 100
 CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760) 720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA 8AM-2PM

TURNER, DAWN M

Provider ID: 480120
Provider Gender: Female
License number: NP22586
NPI: 1386988368
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 1295 CARLSBAD VILLAGE DR
 # 100
 CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760) 720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA

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

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C. Directorio de proveedores de atención primaria

8AM-2PM

FQHC

TRUECARE,

Provider ID: 480120

Provider Gender:

License number: 080000630

NPI: 1245246917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-TRUECARE

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax: (760) 720-7204

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

8AM-2PM

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 480120

Provider Gender: Female

License number: A80674

NPI: 1346354776

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

8AM-2PM

PONIACHIK, SAMUEL I

Provider ID: 480120

Provider Gender: Male

License number: G74757

NPI: 1467485078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

8AM-2PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE E

Provider ID: 480120

Provider Gender: Female

License number: A93248

NPI: 1174703680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-TRUECARE

1295 CARLSBAD VILLAGE DR

100

CARLSBAD, CA 92008-1950

Phone: (760) 720-7766

Fax:

After Hours Phone: (760)

720-7766

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

8AM-2PM

PEDIATRICS

BURGAMY, ELIZABETH B

Provider ID: 326275

Provider Gender: Female

License number: A99859

NPI: 1164609558

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

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C. Directorio de proveedores de atención primaria

Sharp Memorial Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3257 CAMINO DE LOS COCHES STE 202
 CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

GRANT, COLETTE L

Provider ID: 433808
Provider Gender: Female
License number: G65865
NPI: 1073638680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3257 CAMINO DE LOS COCHES STE 202
 CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax:
After Hours Phone: (760) 633-3640
Website:

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

IYENGAR, RADHA A

Provider ID: 480120
Provider Gender: Female
License number: A49273
NPI: 1265448112
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Tamil
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-TRUECARE
 1295 CARLSBAD VILLAGE DR # 100
 CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax:
After Hours Phone: (760) 720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5PM, SA 8AM-2PM

JACOBSON, MICHAEL B

Provider ID: 326268
Provider Gender: Male
License number: A88422
NPI: 1831284249
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Grossmont Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3257 CAMINO DE LOS COCHES STE 202
 CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760) 633-3640
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

METSCH, RANDALL B

Provider ID: 325891
Provider Gender: Male
License number: G69565
NPI: 1619948635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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C. Directorio de proveedores de atención primaria

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760)
633-3640
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MUTH, NATALIE D

Provider ID: 328451
Provider Gender: Female
License number: A116344
NPI: 1497982888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Scripps
Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760)
633-3640
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM

TANAKA, MARY S

Provider ID: 465387
Provider Gender: Female
License number: A116057
NPI: 1295962686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009-8915
Phone: (760) 633-3640
Fax: (760) 633-3644
After Hours Phone: (760)
633-3640
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 480120
Provider Gender: Female
License number: A131678
NPI: 1922402858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-TRUECARE

1295 CARLSBAD VILLAGE DR
100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax:
After Hours Phone: (760)
720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-2PM

PHYSICIANS ASSISTANT

CHISWICK, GARY R

Provider ID: 480120
Provider Gender: Male
License number: PA22667
NPI: 1174964001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Board Certified Specialty: No
IHP-TRUECARE
1295 CARLSBAD VILLAGE DR
100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760)
720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:

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C. Directorio de proveedores de atención primaria

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

CRUZ, ASHLEY D

Provider ID: 480120
Provider Gender: Female
License number: PA22997
NPI: 1063851814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1295 CARLSBAD VILLAGE DR
100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760)
720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-2PM

PADDOCK, DIANA L

Provider ID: 480120
Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Board Certified Specialty: No
IHP-TRUECARE

1295 CARLSBAD VILLAGE DR
100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760)
720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-2PM

RUSSO, KRISTA L

Provider ID: 480120
Provider Gender: Female
License number: PA53036
NPI: 1922471192
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1295 CARLSBAD VILLAGE DR
100
CARLSBAD, CA 92008-1950
Phone: (760) 720-7766
Fax: (760) 720-7204
After Hours Phone: (760)
720-7766
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-2PM

CHULA VISTA

CERTIFIED NURSE PRACTITIONER

ANTHONY, SHARON

Provider ID: 427322
Provider Gender: Female
License number: NP95015566
NPI: 1053887760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHAPIN, DENISE L

Provider ID: 206355
Provider Gender: Female
License number: NP23687
NPI: 1952737033
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

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

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

C. Directorio de proveedores de atención primaria

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

IBARRA, MARTHA A

Provider ID: 427322
Provider Gender: Female
License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

9AM-5PM
ROSS, CRYSTAL H
Provider ID: 427322
Provider Gender: Female
License number: NP95015413
NPI: 1548683378
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SOTO, ROBIN J

Provider ID: 417641
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208

Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

VEGA, TERESA

Provider ID: 206355
Provider Gender: Female
License number: NP95001705
NPI: 1912304569
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

**CERTIFIED REGISTERED
NURSE MIDWIFE**

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

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

C. Directorio de proveedores de atención primaria

BOSTON, LAURA H

Provider ID: 206355
 Provider Gender: Female
 License number: NM792
 NPI: 1174553259
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcscd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

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

Provider Gender: Male
 License number: DC31963
 NPI: 1760464960
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

KAZEM, HARON H

Provider ID: 427322
 Provider Gender: Male
 License number: DC33295
 NPI: 1306221262
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

REYNOSO, ALFONSO

Provider ID: 427322
 Provider Gender: Male
 License number: DC20760
 NPI: 1285921627
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355
 Provider Gender: Female
 License number: DC26269
 NPI: 1952950776
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

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

PLANTE, CHARLES F

Provider ID: 427322

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

C. Directorio de proveedores de atención primaria

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

ENDOCRINOLOGY METABOLISM DIABETES

CARRILLO, MARITZA E

Provider ID: 427322
Provider Gender: Female
License number: A163183
NPI: 1649628587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

PHILIS-TSIMIKAS, ATHENA

Provider ID: 427322
Provider Gender: Female
License number: A50477

NPI: 1922105964
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Greek
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Green Hospital, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

VINCENT, LAUREN C

Provider ID: 427322
Provider Gender: Female
License number: A134303
NPI: 1053757997
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

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

FAMILY PRACTICE

ALANIZ, MATEO A

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

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C. Directorio de proveedores de atención primaria

AMANAT, SOROOSH <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Male <i>License number:</i> A153022 <i>NPI:</i> 1003279621 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM CAMPOS, MELISSA <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A138474 <i>NPI:</i> 1427475318 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	CHERY, FARAH Y <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Female <i>License number:</i> A108681 <i>NPI:</i> 1114183688 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM
ARCE GOMEZ, LAURA E <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A123604 <i>NPI:</i> 1053532986 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER	<i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	CHERY, FARAH Y <i>Provider ID:</i> 417641 <i>Provider Gender:</i> Female <i>License number:</i> A108681 <i>NPI:</i> 1114183688 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> El Centro Regional Medical Center, Sharp Chula Vista Med Ctr <i>Board Certified Specialty:</i> No

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

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C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2325 Fax: After Hours Phone: (619) 515-2325 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM	9AM-5PM DOOHAN, NOEMI C Provider ID: 427322 Provider Gender: Female License number: A89396 NPI: 1972603884 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ukiah Valley Med Ctr, Uc Davis Medical Ctr, Scripps Mercy Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.iypsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM
DEIS, CRISTINA E Provider ID: 314546 Provider Gender: Female License number: A123170 NPI: 1639478811 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1637 3RD AVE STE H CHULA VISTA, CA 91911-5823 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.iypsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA	DY, DIANE J Provider ID: 206355 Provider Gender: Female License number: A153344 NPI: 1467807560 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE	ELSAIED, MOHAMMED K Provider ID: 19561 Provider Gender: Male License number: A100765 NPI: 1821033424 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 330 OXFORD ST STE 106 CHULA VISTA, CA 91911-3118 Phone: (619) 409-1802 Fax: (619) 409-1831 After Hours Phone: (619) 409-1802 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No

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C. Directorio de proveedores de atención primaria

♿ Accessibility: EB, IB, E, R, W
Hours: M-SA 9AM-5PM

ELSAYED, MOHAMMED K , MD

Provider ID: 19561
Provider Gender: Male
License number: A100765
NPI: 1821033424
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
330 OXFORD ST STE 106
CHULA VISTA, CA 91911-3118
Phone: (619) 409-1802
Fax: (619) 409-1831
After Hours Phone: (619) 409-1802
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: EB, IB, E, R, W
Hours: M-SA 9AM-5PM

FLORES, MARIBEL C

Provider ID: 314546
Provider Gender: Female
License number: A95959
NPI: 1124104815
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: (619) 205-1360
Fax:
After Hours Phone: (619) 205-1360
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

GARCIA, KARLA J

Provider ID: 427322
Provider Gender: Female
License number: A120672
NPI: 1154647410
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

HASSANEIN, TAREK I

Provider ID: 414710
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Alvarado Hospital Llc, Hoag Hospital Irvine
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
1323 3RD AVE
CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

HUBLEY, PAUL E <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Male <i>License number:</i> A73172 <i>NPI:</i> 1568496974 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No Ⓜ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (619) 682-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 682-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No Ⓜ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	<i>Provider Gender:</i> Female <i>License number:</i> G57243 <i>NPI:</i> 1376639666 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No Ⓜ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
JIMENEZ, KRYSTAL A <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A159831 <i>NPI:</i> 1922531250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736	LAW, KAREN <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A138534 <i>NPI:</i> 1205253150 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No Ⓜ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	MENON, POOJA S <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A123263 <i>NPI:</i> 1053600064 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736
MCKENNETT, MARIANNE A <i>Provider ID:</i> 427322		

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C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

MERRILL, SARAH E

Provider ID: 427322

Provider Gender: Female

License number: A123492

NPI: 1225399512

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

MOYA, MARY R

Provider ID: 427322

Provider Gender: Female

License number: A80185

NPI: 1093844417

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

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

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

NGUYEN, CARIE C

Provider ID: 427322

Provider Gender: Female

License number: A106103

NPI: 1174781132

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

NGUYEN, LINH T

Provider ID: 206355

Provider Gender: Female

License number: A144995

NPI: 1619357993

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

NGUYEN, LINH T

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C. Directorio de proveedores de atención primaria

Provider ID: 417641 Provider Gender: Female License number: A144995 NPI: 1619357993 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2325 Fax: After Hours Phone: (619) 515-2325 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM	Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	Provider Gender: Female License number: A115699 NPI: 1770718975 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM
NOVOTNY, RICHARD W Provider ID: 427322 Provider Gender: Male License number: A143811 NPI: 1588002877 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736	OSEGUERA, MARIA D Provider ID: 91607 Provider Gender: Female License number: G79997 NPI: 1487627907 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2452 FENTON ST STE 301 CHULA VISTA, CA 91914-4552 Phone: (619) 946-4073 Fax: (619) 946-7243 After Hours Phone: (619) 946-4073 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM	PEDROTTY, JOHN R Provider ID: 427322 Provider Gender: Male License number: G80234 NPI: 1992861629 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736
	PALOMINO, MARY A Provider ID: 427322	

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

C. Directorio de proveedores de atención primaria

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

PEREZ, PERLITA A

Provider ID: 206355
 Provider Gender: Female
 License number: A119689
 NPI: 1174810972
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

PIEROS, JANELLE J

Provider ID: 427322

Provider Gender: Female
 License number: 20A13225
 NPI: 1386935914
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100

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

PISINGER, PATRICIA

Provider ID: 427322
 Provider Gender: Female
 License number: A69264
 NPI: 1861428302
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

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

RAJ, ASHA P

Provider ID: 206355
 Provider Gender: Female
 License number: 20A15683
 NPI: 1003293507
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2325
 Fax:
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

RAJ, ASHA P

Provider ID: 417641

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

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: 20A15683
NPI: 1003293507
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

RAWI, BASHIR A , MD

Provider ID: 168833
Provider Gender: Male
License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302

Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM

RAWI, BASHIR A

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

RAWI, BASHIR A , MD

Provider ID: 168834
Provider Gender: Male
License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 256 LANDIS AVE STE 202
 CHULA VISTA, CA 91910-2650
Phone: (619) 522-0399
Fax: (619) 409-6901
After Hours Phone: (619) 522-0399
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: EB, E, R
Hours: M-SA 9AM-5PM

REDDY, DIVYA K

Provider ID: 427322
Provider Gender: Female
License number: A130224
NPI: 1669766473
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Kannada, Telugu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE

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C. Directorio de proveedores de atención primaria

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

ROSENBLATT, EUGENE M

Provider ID: 427322
 Provider Gender: Male
 License number: 20A9060
 NPI: 1427123991
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

SERPAS, SHAILA

Provider ID: 427322

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

CHULA VISTA, CA 91910-5736

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

SHAHTAJI, ALAN P

Provider ID: 427322
 Provider Gender: Male
 License number: 20A11087
 NPI: 1972751089
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

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

SWARTZ, JOHN R

Provider ID: 427322
 Provider Gender: Male
 License number: G72486
 NPI: 1396754131
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

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

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

C. Directorio de proveedores de atención primaria

TALavera, GREGORY A <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Male <i>License number:</i> A40061 <i>NPI:</i> 1740337161 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	9AM-5PM TREJO, RAUL <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Male <i>License number:</i> A77936 <i>NPI:</i> 1174534184 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM
TEE, ALEXANDRA <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Female <i>License number:</i> A164392 <i>NPI:</i> 1881198406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER	TOLEDO-NADER, CAROLL <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Male <i>License number:</i> A41486 <i>NPI:</i> 1427126648 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA	WHITLEY, NICHOLAS R <i>Provider ID:</i> 427322 <i>Provider Gender:</i> Male <i>License number:</i> A118250 <i>NPI:</i> 1629394721 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH

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

C. Directorio de proveedores de atención primaria

CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	9AM-5PM FQHC CHULA VISTA FAMILY HLTH CTR, Provider ID: 206355 Provider Gender: License number: NPI: 1346480837 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: (619) 397-1161 After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM	855 3RD AVE STE 2200 CHULA VISTA, CA 91911-1353 Phone: (619) 662-4100 Fax: (619) 662-4196 After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 9AM-4PM, SA 9AM-5PM
YOON, RYAN R Provider ID: 427322 Provider Gender: Male License number: A114600 NPI: 1942435144 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA	CHULA VISTA PEDIATRICS, Provider ID: 482034 Provider Gender: License number: NPI: 1326486861 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: IHP-SAN YSIDRO HEALTH CENTER	FAMILY HLTH CTR SAN DIEGO-RICE FAM HC, Provider ID: 417641 Provider Gender: License number: 550002305 NPI: 1083959464 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2325 Fax: (619) 420-0660 After Hours Phone: (619) 515-2325 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM

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

C. Directorio de proveedores de atención primaria

OTAY FAMILY HEALTH CLINIC,

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

SAN YSIDRO HEALTH CHULA VISTA,

Provider ID: 427322
 Provider Gender:
 License number:
 NPI: 1326486861
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE

CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax: (619) 425-1184
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

GENERAL DENTISTRY

PHAM, QUYNH V

Provider ID: 427322
 Provider Gender: Female
 License number: DDS102880
 NPI: 1366917353
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA K

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

INTERNAL MEDICINE

CHEN, TSUH YIN

Provider ID: 427322
 Provider Gender: Female
 License number: C55563
 NPI: 1093803520
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish

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

C. Directorio de proveedores de atención primaria

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

DALHOUMI, SARAH

Provider ID: 427322
Provider Gender: Female
License number: A121861
NPI: 1033435383
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

FERNANDEZ, RODRIGO J

Provider ID: 536713
Provider Gender: Male
License number: A44441
NPI: 1366539793
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 4TH AVE STE 201
 CHULA VISTA, CA 91910-4428
Phone: (619) 476-9054
Fax: (619) 476-9056
After Hours Phone: (619)
 476-9054
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

FLORES, ROCIO M

Provider ID: 490002
Provider Gender: Female
License number: A69424
NPI: 1881607067
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 296 H ST STE 201
 CHULA VISTA, CA 91910-4779
Phone: (619) 271-5551
Fax: (619) 271-5556
After Hours Phone: (619)
 271-5551
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

FUENTES, MARIA G

Provider ID: 234312
Provider Gender: Female
License number: A83896
NPI: 1811070261
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 717 3RD AVE
 CHULA VISTA, CA 91910-5803
Phone: (619) 941-1545
Fax: (619) 941-1558
After Hours Phone: (619)
 941-1545
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

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

C. Directorio de proveedores de atención primaria

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

HAMMETT, ERIN K

Provider ID: 427322
Provider Gender: Female
License number: 20A14025
NPI: 1467884098
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Santa Barbara Cottage Hosp, Goleta Valley Cottage Hosp
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

UWEDJOJEVWE, LETICIA M

Provider ID: 380242
Provider Gender: Female
License number: A80329
NPI: 1891882221
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 340 4TH AVE STE 10
 CHULA VISTA, CA 91910-3813
Phone: (619) 934-2215
Fax: (619) 500-5955
After Hours Phone: (619) 934-2215
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

VELAZQUEZ CAMARENA, MARIA D

Provider ID: 427322
Provider Gender: Female
License number: A56153
NPI: 1518965714
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

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

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 206355
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206355
Provider Gender: Female
License number: A68463

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

C. Directorio de proveedores de atención primaria

NPI: 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⌘ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	Healthcare Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⌘ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	No ⌘ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM
CAMPBELL, ELIZABETH C <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Female <i>License number:</i> 20A6763 NPI: 1932147329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And	CARTER, KHALIL J <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Male <i>License number:</i> A113001 NPI: 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	CERVANTES, SANDRA M <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Female <i>License number:</i> A118095 NPI: 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2500 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⌘ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM
	DE MIK, TRAVIS J <i>Provider ID:</i> 206355 <i>Provider Gender:</i> Male <i>License number:</i> A108228 NPI: 1629277322 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	

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

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

C. Directorio de proveedores de atención primaria

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

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206355
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

HANLEY, LAUREN E

Provider ID: 206355
Provider Gender: Female
License number: C174771
NPI: 1053392035
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

JIBRIL, DEANAH A

Provider ID: 427322
Provider Gender: Female
License number: 20A17489
NPI: 1134183114
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish

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

LIPSCHITZ, LISA S

Provider ID: 206355
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500

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

C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 206355

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 206355

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License number: A47906

NPI: 1437181922

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Mercy General Hospital, Scripps Mercy Hospital Chula Vista, Bakersfield Memorial Hosp, Sharp Memorial Hospital, San Joaquin Comm Hosp, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH

CENTER

678 3RD AVE

CHULA VISTA, CA 91910-5736

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

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

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206355

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

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

SAPRA, SONIA V

Provider ID: 206355
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

SEFA-BOAKYE, KOFI D

Provider ID: 427322
Provider Gender: Male
License number: G59670
NPI: 1902993660
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

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

SHORT, ABIAD C

Provider ID: 427322
Provider Gender: Male
License number: A114893
NPI: 1750559589
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

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

SINGH, RASHMI

Provider ID: 206355
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

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

C. Directorio de proveedores de atención primaria

Provider ID: 206355
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:

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

ZIEG, ALAN J

Provider ID: 206355
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista

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

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 427322
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

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

PAPASTERGIOU, GEORGIOS

Provider ID: 427322
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PONS, MAURICIO E

Provider ID: 427322
Provider Gender: Male

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

C. Directorio de proveedores de atención primaria

License number: A87650
 NPI: 1376723759
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

SKAF, AYHAM R

Provider ID: 427322
 Provider Gender: Male
 License number: A120584
 NPI: 1285888628
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH

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

PEDIATRICS

AKASHI, MARC K

Provider ID: 163322
 Provider Gender: Male
 License number: A123922
 NPI: 1205002417
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
 Phone: (619) 482-3090
 Fax: (619) 482-7350
 After Hours Phone: (619) 482-3090
 Website:
 Email:
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

ATIENZA, PAMELA V

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

BARBADILLO, FERDINAND F

Provider ID: 70456
 Provider Gender: Male
 License number: A49307
 NPI: 1982662193
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Paradise

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

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

C. Directorio de proveedores de atención primaria

Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 890 EASTLAKE PKWY STE 200
 CHULA VISTA, CA 91914-4521
Phone: (619) 656-6817
Fax: (619) 656-6908
After Hours Phone: (619) 656-6817
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

BRESLOW, ADAM D

Provider ID: 230454
Provider Gender: Male
License number: G60853
NPI: 1972574085
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

BROUDY, ABRAHAM E

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

CAPETANAKIS, ELENI I

Provider ID: 89610
Provider Gender: Female
License number: A70397
NPI: 1346211554
Provider English Spoken: Yes

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

COHEN, ELAINE H

Provider ID: 6321
Provider Gender: Female
License number: G22152
NPI: 1831245984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 280 E ST
 CHULA VISTA, CA 91910-2945

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

C. Directorio de proveedores de atención primaria

Phone: (619) 425-3951 Fax: (619) 425-3958 After Hours Phone: (619) 425-3951 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM CORDOBA, MIGUEL A Provider ID: 88187 Provider Gender: Male License number: A75350 NPI: 1053382176 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 865 3RD AVE STE 101 CHULA VISTA, CA 91911-1349 Phone: (619) 426-7910 Fax: (619) 426-2337 After Hours Phone: (619) 426-7910 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R	Hours: M-SA 9AM-5PM DI FRANCO, MATTHEW J Provider ID: 499127 Provider Gender: Male License number: G58994 NPI: 1841343548 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 1635 3RD AVE STE J CHULA VISTA, CA 91911-5867 Phone: (619) 426-8121 Fax: (619) 426-5950 After Hours Phone: (619) 426-8121 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM DONG, TAMMY M Provider ID: 427322 Provider Gender: Female License number: A66903 NPI: 1386655413 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH	CENTER 678 3RD AVE CHULA VISTA, CA 91910-5736 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM DORINGO, ELAINIE D Provider ID: 267100 Provider Gender: Female License number: A70842 NPI: 1013005636 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Rady Childrens Hospital San Diego, Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 865 3RD AVE STE 101 CHULA VISTA, CA 91911-1349 Phone: (619) 426-7910 Fax: (619) 426-2337 After Hours Phone: (619) 426-7910 Website: Email: Medi-Cal Open Panel: Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

FLETCHER, EMILY E

Provider ID: 232312
Provider Gender: Female
License number: A122247
NPI: 1780935940
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Mercy Hospital Bakersfield, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2440 FENTON ST # 100
 CHULA VISTA, CA 91914-3516
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

FRESNO, BLANCA I

Provider ID: 102434
Provider Gender: Female
License number: A45205
NPI: 1346258787

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

GALE, MARVIN L

Provider ID: 45185
Provider Gender: Male
License number: A24816
NPI: 1033264148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 280 E ST
 CHULA VISTA, CA 91910-2945
Phone: (619) 425-3951
Fax: (619) 425-3958
After Hours Phone: (619) 425-3951

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

GARCIA, CARLOS M

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

GARCIA, RAFAEL A

Provider ID: 360408
Provider Gender: Male
License number: A50715

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

C. Directorio de proveedores de atención primaria

NPI: 1053414086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
752 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911-6660
Phone: (619) 656-0206
Fax: (619) 656-8936
After Hours Phone: (619) 656-0206
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

GHAHREMANI, SIMIN M
Provider ID: 482034
Provider Gender: Female
License number: C51110
NPI: 1508904657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 9AM-4PM, SA 9AM-5PM

HOLLICK, NATALIE V
Provider ID: 473802
Provider Gender: Female
License number: 20A16170
NPI: 1558716845
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
865 3RD AVE STE 101
CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM

ISAIAS, AGNELA T
Provider ID: 482034
Provider Gender: Female
License number: A82912

NPI: 1790772572
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 9AM-4PM, SA 9AM-5PM

JACOBS-KLEISLI, MILAGROS J
Provider ID: 467596
Provider Gender: Female
License number: 20A11985
NPI: 1811221641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Methodist Hosp Of Southern California
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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

C. Directorio de proveedores de atención primaria

769 MEDICAL CENTER CT STE 300

CHULA VISTA, CA 91911-6602

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)

482-3090

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

JOLLY, DESMOND A

Provider ID: 57697

Provider Gender: Male

License number: A103143

NPI: 1063652162

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital Chula

Vista, Sharp Chula Vista Med

Ctr, Scripps Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911-1349

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)

426-7910

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

KORSAND, SID S

Provider ID: 482034

Provider Gender: Male

License number: A49591

NPI: 1588634513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Turkish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

855 3RD AVE STE 2200

CHULA VISTA, CA 91911-1353

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

MISTRY, CHETAN A

Provider ID: 86439

Provider Gender: Male

License number: A97646

NPI: 1467505834

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2440 FENTON ST # 100

CHULA VISTA, CA 91914-3516

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)

656-3040

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

MORRIS, KENNETH H

Provider ID: 529313

Provider Gender: Male

License number: G79634

NPI: 1851307144

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr, Palomar

Medical Center

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911-1349

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)

426-7910

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

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

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

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

MOSQUERA, DIANA I

Provider ID: 371232

Provider Gender: Female

License number: C148618

NPI: 1144238098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

769 MEDICAL CENTER CT STE 300

CHULA VISTA, CA 91911-6602

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)

482-3090

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MOSQUERA, DIANA I

Provider ID: 463001

Provider Gender: Female

License number: C148618

NPI: 1144238098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911-1349

Phone: (619) 426-7910

Fax:

After Hours Phone: (619)

426-7910

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

NGUYEN, TRUC H

Provider ID: 78518

Provider Gender: Female

License number: A95596

NPI: 1881884054

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Chula Vista Med Ctr, Rady

Childrens Hospital San Diego,

Washington Hospital, Scripps

Mercy Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

2440 FENTON ST # 100

CHULA VISTA, CA 91914-3516

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)

656-3040

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

OIRA, VICTORIA R

Provider ID: 73140

Provider Gender: Female

License number: A51972

NPI: 1134172448

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Rady Childrens

Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

890 EASTLAKE PKWY STE 203

CHULA VISTA, CA 91914-4521

Phone: (619) 656-3020

Fax: (619) 656-3019

After Hours Phone: (619)

370-6661

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

PIANSAY, MARIA CORAZON M

Provider ID: 427322

Provider Gender: Female

License number: A93785

NPI: 1669680351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

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

C. Directorio de proveedores de atención primaria

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

PIANSAY, MARIA CORAZON M
Provider ID: 470963
Provider Gender: Female
License number: A93785
NPI: 1669680351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
1635 3RD AVE STE J
CHULA VISTA, CA 91911-5867
Phone: (619) 426-8121
Fax: (619) 426-5950
After Hours Phone: (619)
426-8121
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

PIZARRO, LUZVIMINDA L
Provider ID: 314546
Provider Gender: Female
License number: A40161
NPI: 1770594863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: (619) 662-4100

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

PIZARRO, LUZVIMINDA L
Provider ID: 427322
Provider Gender: Female
License number: A40161
NPI: 1770594863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
678 3RD AVE

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

SALAZAR, JUANITA
Provider ID: 206355
Provider Gender: Female
License number: A78355
NPI: 1912938325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

SANCHEZ, CARLOS J

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

SANTIAGO, ROXANE M

Provider ID: 269279
Provider Gender: Female
License number: A122396
NPI: 1033461801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital,

Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

VALENCIA, MARILES F

Provider ID: 104059
Provider Gender: Female
License number: A54929
NPI: 1275541625
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1741 EASTLAKE PKWY STE 107
 CHULA VISTA, CA 91915-2032
Phone: (619) 482-1700
Fax: (619) 475-4578
After Hours Phone: (619) 482-1700

Website:

Email:

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

YAO, CATHERINE S

Provider ID: 371204
Provider Gender: Female
License number: A119644
NPI: 1801166442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

ZARGAR, SHABNAM

Provider ID: 371075
Provider Gender: Female
License number: A128721
NPI: 1417256074
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

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

PHYSICIANS ASSISTANT

REVELES, DIANA
Provider ID: 417641
Provider Gender: Female
License number: PA19306
NPI: 1548455405
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5PM, SA 9AM-5PM

PODIATRIST

MANCHEL, BRUCE A
Provider ID: 427322
Provider Gender: Male
License number: DPM2930
NPI: 1790890788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

SCHNEIDER, SARAH A

Provider ID: 206355
Provider Gender: Female
License number: DPM4819
NPI: 1326282237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO
Provider ID: 206355
Provider Gender: Male
License number: PT37189
NPI: 1437445566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

CUMMINGS, GEORGE P

Provider ID: 206355

Provider Gender: Male

License number: PT295173

NPI: 1497236384

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

GEORGE, JENNIFER A

Provider ID: 206355

Provider Gender: Female

License number: PT294245

NPI: 1215402177

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

MIGNEA, DAVID S

Provider ID: 206355

Provider Gender: Male

License number: PT293536

NPI: 1043736879

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License number: PT292823

NPI: 1770025595

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

TABONE, MICHELLE K

Provider ID: 206355

Provider Gender: Female

License number: PT291706

NPI: 1548714652

Provider English Spoken: Yes

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C. Directorio de proveedores de atención primaria

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

RHEUMATOLOGY

REDDY, DANA A
Provider ID: 427322
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736

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

SPEECH PATHOLOGIST

CABADING, DOREEN L
Provider ID: 427322
Provider Gender: Female
License number: SP18192
NPI: 1043507585
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

EL CAJON

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A
Provider ID: 478971
Provider Gender: Male
License number: A36637
NPI: 1295747038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Long Beach Memorial Med Ctr, Providence St Mary Medical Center
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 401-0404
Fax:
After Hours Phone: (619) 401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

CERTIFIED NURSE PRACTITIONER

BELÉN, NEZER B
Provider ID: 418340
Provider Gender: Male
License number: NP95009292
NPI: 1386120723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO

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

BLAIS, BRITTNEY

Provider ID: 418340
Provider Gender: Female
License number: NP95014574
NPI: 1952852808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

FAMILY HEALTH CENTERS OF SAN DIEGO

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

DELA CRUZ, ANGELITO L

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

DRISCOLL, SUSAN D

Provider ID: 569910
Provider Gender: Female
License number: NP95012943
NPI: 1477755684
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
875 EL CAJON BLVD
EL CAJON, CA 92020-5714

Phone: (619) 662-4100

Fax:

After Hours Phone: (619) 662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

GARCIA, JOHNNY

Provider ID: 418340
Provider Gender: Male
License number: NP95007000
NPI: 1932622156
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KELLOGG, KRISTEN J

Provider ID: 418340

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

C. Directorio de proveedores de atención primaria

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

KING, KRISTI

Provider ID: 206272
Provider Gender: Female
License number: NP19685
NPI: 1588988703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (760) 466-9800
Fax:
After Hours Phone: (760) 466-9800

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

LEONARD, BEVERLY S

Provider ID: 206354
Provider Gender: Female
License number: NP10943
NPI: 1285772392
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

After Hours Phone: (619) 515-2499

Website: www.fhcsd.org
Email:

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

LU, TAMMY C

Provider ID: 206354
Provider Gender: Female
License number: NP95007253
NPI: 1457879132
Provider English Spoken: Yes
Provider Language(s) Spoken:

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

MANGENE, CYNTHIA L

Provider ID: 206354
Provider Gender: Female
License number: NP6782
NPI: 1548292626
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME

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

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

OCHOA, ERLINDA A

Provider ID: 185267

Provider Gender: Female

License number: NP4430

NPI: 1346437464

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax:

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

OCHOA, ERLINDA A

Provider ID: 418501

Provider Gender: Female

License number: NP4430

NPI: 1346437464

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax:

After Hours Phone: (619)

795-5991

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

ODA, THAGHAR M

Provider ID: 206354

Provider Gender: Female

License number: RN810863

NPI: 1063835692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Amharic, Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ODA, THAGHAR M

Provider ID: 206354

Provider Gender: Female

License number: NP95000205

NPI: 1063835692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Amharic, Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ODA, THAGHAR M

Provider ID: 418340

Provider Gender: Female

License number: RN810863

NPI: 1063835692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Amharic, Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

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

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

C. Directorio de proveedores de atención primaria

No ☞ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM ODA, THAGHAR M <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> NP95000205 <i>NPI:</i> 1063835692 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Amharic, Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM REAL, MARIA F <i>Provider ID:</i> 185267 <i>Provider Gender:</i> Female <i>License number:</i> NP17328 <i>NPI:</i> 1548450471 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC	165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 312-0347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 312-0347 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM REID, EMILY <i>Provider ID:</i> 185267 <i>Provider Gender:</i> Female <i>License number:</i> NP95002766 <i>NPI:</i> 1083081467 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC 165 S 1ST ST EL CAJON, CA 92019-4795 <i>Phone:</i> (619) 312-0347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 312-0347 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM SMITH, SHARON T <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> RN428876	<i>NPI:</i> 1780603597 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM SMITH, SHARON T <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> NP15444 <i>NPI:</i> 1780603597 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

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

SWAN, MELANIE A

Provider ID: 206354
Provider Gender: Female
License number: NP95000818
NPI: 1871934414
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

VERDUZCO GONZALEZ, AURORA B

Provider ID: 185267
Provider Gender: Female
License number: NP95001961
NPI: 1932452323
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

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

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185267
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM

WHITESIDE, BARBARA

Provider ID: 569910
Provider Gender: Female
License number: NP5705
NPI: 1194942300
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-F 8AM-5PM, SA
 9AM-5PM

WILDER, ASHLEY

Provider ID: 418340
Provider Gender: Female
License number: NP95016274
NPI: 1750766895
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

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C. Directorio de proveedores de atención primaria

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

WILLIAMS, BREAHA A

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

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

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA C

Provider ID: 418340
 Provider Gender: Female
 License number: NM1721
 NPI: 1255489571
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498

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

CHIROPRACTOR

ILCHENA, ALESANDRA N

Provider ID: 206272
 Provider Gender: Female
 License number: DC32800
 NPI: 1871046664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

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

SOSA, DAVID S

Provider ID: 206354
 Provider Gender: Male
 License number: DC33150
 NPI: 1013308675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499

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

SOSA, DAVID S

Provider ID: 418340
 Provider Gender: Male
 License number: DC33150

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

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C. Directorio de proveedores de atención primaria

NPI: 1013308675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

UY, ASHLEY N
 Provider ID: 418340
 Provider Gender: Female
 License number: DC33869
 NPI: 1174059760
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Chinese
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:

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

ZECHA, RONALD S
 Provider ID: 206272
 Provider Gender: Male
 License number: DC28605
 NPI: 1427252121
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619)
 440-2751
 Website: www.iypsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

NAGELBERG, JODI B
 Provider ID: 418340
 Provider Gender: Female
 License number: A146838
 NPI: 1720474141

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

VINCENT, LAUREN C
 Provider ID: 418340
 Provider Gender: Female
 License number: A134303
 NPI: 1053757997
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None

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C. Directorio de proveedores de atención primaria

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

FAMILY PRACTICE

ABDALLAH, ALI H

Provider ID: 418340
Provider Gender: Male
License number: 20A15471
NPI: 1649699968
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

AL ANI, NAJWAN N

Provider ID: 418340
Provider Gender: Female
License number: A144974
NPI: 1275948473
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

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

BAGINGITO, AUSTIN G

Provider ID: 418340
Provider Gender: Male
License number: A163977
NPI: 1942705637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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

BROWN, BRANDON S

Provider ID: 418340
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

CORMAN, DANIEL M

Provider ID: 418340
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF

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C. Directorio de proveedores de atención primaria

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

DOMINGUEZ, DENNIS O
Provider ID: 569910
Provider Gender: Male
License number: G43179
NPI: 1225063811
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
875 EL CAJON BLVD
EL CAJON, CA 92020-5714
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-F 8AM-5PM, SA 9AM-5PM
GHAFAARI, DAUOD M
Provider ID: 478971
Provider Gender: Male
License number: A98486
NPI: 1053417691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: (619) 401-0404
Fax:
After Hours Phone: (619) 401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

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

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

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

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

JIBRI, NISHWAN N
Provider ID: 206272
Provider Gender: Male
License number: A135468

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

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

C. Directorio de proveedores de atención primaria

NPI: 1164788683
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Italian
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

KASAWA, JOHN

Provider ID: 569910
 Provider Gender: Male
 License number: A79338
 NPI: 1134230329
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100

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

KORKIS, EBTISSAM H , MD

Provider ID: 383504
 Provider Gender: Female
 License number: A89767
 NPI: 1780746263
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French, Kurdish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 1530 JAMACHA RD # E-F
 EL CAJON, CA 92019-3700
 Phone: (619) 441-9200
 Fax: (619) 441-0710
 After Hours Phone: (619) 441-9200

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

LEE, HEATHER F

Provider ID: 206272
 Provider Gender: Female
 License number: A164702
 NPI: 1053808048
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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

LIN, SHUANG

Provider ID: 206354
 Provider Gender: Female
 License number: A138887
 NPI: 1689093684
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

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

C. Directorio de proveedores de atención primaria

No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM	IHP-NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	9AM-5PM NASSIR, BASSAM K <i>Provider ID:</i> 569910 <i>Provider Gender:</i> Male <i>License number:</i> A101888 <i>NPI:</i> 1386848166 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 875 EL CAJON BLVD EL CAJON, CA 92020-5714 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
MANDOYAN, AUSTIN <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> A161682 <i>NPI:</i> 1841726148 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	MOULD, KEVIN S <i>Provider ID:</i> 206272 <i>Provider Gender:</i> Male <i>License number:</i> A90920 <i>NPI:</i> 1255351748 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Woodland Memorial Hosp <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA	NGUYEN, KERRIE K <i>Provider ID:</i> 206272 <i>Provider Gender:</i> Female <i>License number:</i> A158244 <i>NPI:</i> 1407380710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819
MATIALEU, LEOPOLDINE P <i>Provider ID:</i> 206272 <i>Provider Gender:</i> Female <i>License number:</i> A152369 <i>NPI:</i> 1255759718 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No	<i>Hours:</i> M-F 8AM-5PM, SA	

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

C. Directorio de proveedores de atención primaria

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

NIAZI, HARRIS O

Provider ID: 418340

Provider Gender: Male

License number: A146111

NPI: 1174905871

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

PATEL, RAKESH R

Provider ID: 206272

Provider Gender: Male

License number: A76352

NPI: 1205861010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

PUTRUS, RAMIZ S

Provider ID: 418501

Provider Gender: Male

License number: A68184

NPI: 1144300534

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

1032 BROADWAY

EL CAJON, CA 92021-7416

Phone: (619) 795-5991

Fax:

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

TESSEMA, JUDITH

Provider ID: 206272

Provider Gender: Female

License number: A136409

NPI: 1083059265

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

THIERMANN, PAIGE A

Provider ID: 206272

Provider Gender: Female

License number: A114779

NPI: 1134411432

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Kurdish, Spanish, Syriac

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

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

C. Directorio de proveedores de atención primaria

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

FQHC

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

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

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

**FAMILY HLTH CTR SAN
 DIEGO-EL CAJON,**
Provider ID: 418340
Provider Gender:
License number: 550003553
NPI: 1932561198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

**LA MAESTRA CHC EL CAJON
 BROADWAY,**
Provider ID: 418501
Provider Gender:
License number: 550003567
NPI: 1134590086
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619)
 795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

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

C. Directorio de proveedores de atención primaria

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267
 Provider Gender:
 License number:
 NPI: 1336353721
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 Fax: (619) 749-5480
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

NEIGHBORHOOD HEALTHCARE EL CAJON,

Provider ID: 206272
 Provider Gender:
 License number: 090000156
 NPI: 1760667950
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

Phone: (619) 440-2751
 Fax: (360) 462-2746
 After Hours Phone: (619) 440-2751
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910
 Provider Gender:
 License number: 550002514
 NPI: 1568845741
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185267
 Provider Gender: Male
 License number: G45632
 NPI: 1548281322
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Dutch, French, Spanish,
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Providence
 Santa Rosa Memorial Hospital,
 Ucsd Medical Ctr, Stanford
 Health Care, California Pacific
 Med Ctr, Selma Community
 Hospital, Adventist Medical
 Center, Adventist Med Ctr
 Reedley, Loma Linda University
 Comm Med Ctr, Regional
 Medical Ctr Of San Jose
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
 Phone: (619) 312-0347
 Fax:
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

AL-TAMEEMI, AHMED

Provider ID: 478971
 Provider Gender: Male
 License number: A151547
 NPI: 1134513211
 Provider English Spoken: Yes

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

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

C. Directorio de proveedores de atención primaria

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

ALWASH, MUSTAFA A

Provider ID: 418340
Provider Gender: Male
License number: A160516
NPI: 1679936439
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

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

BRIONES COLMAN, FELICIA R

Provider ID: 206354
Provider Gender: Female
License number: A80153
NPI: 1962517367
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARPENTER, ROBERT J

Provider ID: 575387
Provider Gender: Male
License number: 20A10964
NPI: 1356343040
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

DUONG, MAI T

Provider ID: 418340
Provider Gender: Female
License number: A127798
NPI: 1629339304
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA

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

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

C. Directorio de proveedores de atención primaria

9AM-5PM

GORGES, RANDA A

Provider ID: 418340
Provider Gender: Female
License number: A138815
NPI: 1285079509
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

JABRI, ZAIN T

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

FAMILY HEALTH CENTERS OF SAN DIEGO

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

LAU, BENISON C

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

PARIKH, MILIND D

Provider ID: 418340
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498

Fax:

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

RATNIEWSKI, ALFREDO

Provider ID: 478971
Provider Gender: Male
License number: C42220
NPI: 1689768459
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
 Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION

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C. Directorio de proveedores de atención primaria

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

Phone: (619) 873-8940

Fax:

After Hours Phone: (619)

873-8940

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

REDDY, ARJUN N , MD

Provider ID: 428134

Provider Gender: Male

License number: A61204

NPI: 1730132457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5442 SYCUAN RD

EL CAJON, CA 92019-1816

Phone: (619) 445-0707

Fax:

After Hours Phone: (619)

445-0707

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

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

Hours: M-SA 9AM-5PM

ROUEL, LINDA Y

Provider ID: 308485

Provider Gender: Female

License number: A107575

NPI: 1326128950

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Mandarin, Syriac

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp

Memorial Hospital, Grossmont

Hospital

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

860 JAMACHA RD STE 107

EL CAJON, CA 92019-3225

Phone: (619) 456-9920

Fax: (619) 456-9340

After Hours Phone: (619)

456-9920

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

SHEIKH-MOHAMED, HALA

Provider ID: 418340

Provider Gender: Female

License number: A159247

NPI: 1972946770

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-5498

Fax:

After Hours Phone: (619)

515-5498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

SIHOTA, GURPREET

Provider ID: 206354

Provider Gender: Female

License number: 20A13700

NPI: 1659715852

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax:

After Hours Phone: (619)

515-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: ME

Hours: M-SA 9AM-5PM

TCHAKMAKJIAN, LEVON N

Provider ID: 569910

Provider Gender: Male

License number: C144411

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

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C. Directorio de proveedores de atención primaria

NPI: 1790744795
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Hebrew
Cultural Competency: No
Hospital Affiliation: North Bay Vacavalley Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
875 EL CAJON BLVD
EL CAJON, CA 92020-5714
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

VETTICADEN, SANTOSH J

Provider ID: 206272
Provider Gender: Male
License number: C53062
NPI: 1679102461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org

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

YOON, TAE H

Provider ID: 418340
Provider Gender: Male
License number: C161090
NPI: 1508918178
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

INTERVENTIONAL CARDIOLOGY

KAFRI, HASSAN

Provider ID: 569910
Provider Gender: Male
License number: A96002

NPI: 1730258401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
875 EL CAJON BLVD
EL CAJON, CA 92020-5714
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

MOUSSAVIAN, MEHRAN

Provider ID: 418340
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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C. Directorio de proveedores de atención primaria

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

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

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

BUECHNER, CHARLENE A

Provider ID: 418340

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And
Newborns

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

BULLOCH, EDGAR M

Provider ID: 478971

Provider Gender: Male

License number: A113241

NPI: 1508046376

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: (619) 873-8940

Fax:

After Hours Phone: (619)
873-8940

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 418340

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Palomar Medical Center,

Palomar Health Downtown

Campus, Pomerado Hospital,

Rady Childrens Hospital San

Diego, Sharp Coronado Hosp

And Healthcare Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 418340

Provider Gender: Female

License number: 20A14919

NPI: 1619397031

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

CARTER, KHALIL J

Provider ID: 418340

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

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

Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

CERVANTES, SANDRA M

Provider ID: 418340

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

DE MIK, TRAVIS J

Provider ID: 418340

Provider Gender: Male

License number: A108228

NPI: 1629277322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

FAKSH, ARIJ

Provider ID: 185267

Provider Gender: Female

License number: 20A14222

NPI: 1912166737

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Tri City
Medical Ctr, Scripps Mercy
Hospital, Scripps Green Hospital,
Scripps Memorial Hospital
Encinitas, Scripps Memorial
Hospital, Scripps Mercy Hospital
Chula Vista

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

165 S 1ST ST

EL CAJON, CA 92019-4795

Phone: (619) 312-0347

Fax:

After Hours Phone: (619)

312-0347

Website: www.lamaestra.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

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

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

C. Directorio de proveedores de atención primaria

No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM FAKSH, ARIJ <i>Provider ID:</i> 418501 <i>Provider Gender:</i> Female <i>License number:</i> 20A14222 <i>NPI:</i> 1912166737 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC 1032 BROADWAY EL CAJON, CA 92021-7416 <i>Phone:</i> (619) 795-5991 <i>Fax:</i> <i>After Hours Phone:</i> (619) 795-5991 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> A148014 <i>NPI:</i> 1457794752 <i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM HANLEY, LAUREN E <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> C174771 <i>NPI:</i> 1053392035 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org	<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM KHAN, ALIYA I <i>Provider ID:</i> 418501 <i>Provider Gender:</i> Female <i>License number:</i> G50634 <i>NPI:</i> 1285687350 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC 1032 BROADWAY EL CAJON, CA 92021-7416 <i>Phone:</i> (619) 795-5991 <i>Fax:</i> <i>After Hours Phone:</i> (619) 795-5991 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM LIPSCHITZ, LISA S <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
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C. Directorio de proveedores de atención primaria

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

LOEFFLER, ALLISON M
Provider ID: 418340
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

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

MELENDEZ BERRIOS, IARA DEL M
Provider ID: 418340
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

PAPA, RHETT R
Provider ID: 478971
Provider Gender: Male
License number: 20A11733
NPI: 1063642312
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 873-8940
Fax:
After Hours Phone: (619) 873-8940
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 418340
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

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

C. Directorio de proveedores de atención primaria

SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM	9AM-5PM SINGH, RASHMI Provider ID: 418340 Provider Gender: Female License number: A168236 NPI: 1679937619 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM	133 W MAIN ST STE 100 EL CAJON, CA 92020-3325 Phone: (619) 873-8940 Fax: After Hours Phone: (619) 873-8940 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM
SAPRA, SONIA V Provider ID: 418340 Provider Gender: Female License number: A164859 NPI: 1952751711 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8:30AM-5:30PM, SA	SULLIVAN, MARY L Provider ID: 478971 Provider Gender: Female License number: A132556 NPI: 1588893564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Grossmont Hospital Board Certified Specialty: No BORREGO COMMUNITY HEALTH FOUNDTION	WINESBURG, JENNIFER J Provider ID: 418340 Provider Gender: Female License number: 20A11535 NPI: 1811162456 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2498 Fax: After Hours Phone: (619) 515-2498 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility:

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

C. Directorio de proveedores de atención primaria

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

ZIEG, ALAN J

Provider ID: 418340

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

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

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340

Provider Gender: Male

License number: A107093

NPI: 1588825129

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

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

JARDON, JAVIER A

Provider ID: 569910

Provider Gender: Male

License number: A131365

NPI: 1609171982

Provider English Spoken: Yes

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: California Hosp Med Ctr Los Angeles, El Centro Regional Medical Center

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

875 EL CAJON BLVD

EL CAJON, CA 92020-5714

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

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

PAPASTERGIOU, GEORGIOS

Provider ID: 569910

Provider Gender: Male

License number: A127706

NPI: 1790054393

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

875 EL CAJON BLVD

EL CAJON, CA 92020-5714

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

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

PONS, MAURICIO E

Provider ID: 569910

Provider Gender: Male

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

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

C. Directorio de proveedores de atención primaria

License number: A87650
 NPI: 1376723759
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

SKAF, AYHAM R

Provider ID: 569910
 Provider Gender: Male
 License number: A120584
 NPI: 1285888628
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH

CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

PEDIATRICS

CONE, STEPHANIE E

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

No
 Accessibility: W
 Hours: M-SA 9AM-5PM

CONE, STEPHANIE E

Provider ID: 418501
 Provider Gender: Female
 License number: A123929
 NPI: 1437444858
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
 Phone: (619) 795-5991
 Fax:
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

FIGUEROA RODRIGUEZ, BRENDA L

Provider ID: 478971
 Provider Gender: Female
 License number: A114674
 NPI: 1134205214
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation:

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

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
Phone: (619) 873-8940

Fax:
After Hours Phone: (619) 873-8940

Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No

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

FINK, REBECCA

Provider ID: 546047
Provider Gender: Female
License number: A159345
NPI: 1659725562
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

844 JACKMAN ST
 EL CAJON, CA 92020-3053

Phone: (619) 442-2560

Fax: (619) 442-7836

After Hours Phone: (619) 442-2560

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:* EB, IB, E
Hours: M-SA 9AM-5PM

FLEMING, TARA M

Provider ID: 418340

Provider Gender: Female

License number: A152462

NPI: 1972965242

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

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

FRANCIS, KATHERINE L

Provider ID: 206272

Provider Gender: Female

License number: G80917

NPI: 1659301547

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619) 440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

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

HOANG, VY U

Provider ID: 546310

Provider Gender: Female

License number: A125768

NPI: 1649575135

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

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

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

844 JACKMAN ST

EL CAJON, CA 92020-3053

Phone: (619) 442-2560

Fax: (619) 442-7836

After Hours Phone: (619)

442-2560

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:* EB, IB, E

Hours: M-SA 9AM-5PM

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

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

C. Directorio de proveedores de atención primaria

KODSI, ALICIA M <i>Provider ID:</i> 418340 <i>Provider Gender:</i> Female <i>License number:</i> A147976 <i>NPI:</i> 1932514353 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2498 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2498 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🚶 <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	<i>Phone:</i> (760) 742-2782 <i>Fax:</i> <i>After Hours Phone:</i> (760) 742-2782 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🚶 <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	<i>License number:</i> A122868 <i>NPI:</i> 1902156904 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Grossmont Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 844 JACKMAN ST EL CAJON, CA 92020-3053 <i>Phone:</i> (619) 442-2560 <i>Fax:</i> (619) 442-7836 <i>After Hours Phone:</i> (619) 442-2560 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No 🚶 <i>Accessibility:</i> EB, IB, E <i>Hours:</i> M-SA 9AM-5PM
LYNN, JOHN G <i>Provider ID:</i> 206272 <i>Provider Gender:</i> Male <i>License number:</i> A87637 <i>NPI:</i> 1891729968 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819	NAGNUR, PRITI <i>Provider ID:</i> 206354 <i>Provider Gender:</i> Female <i>License number:</i> A170055 <i>NPI:</i> 1316289929 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Kannada <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🚶 <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM	NGUYEN, VI T <i>Provider ID:</i> 546509 <i>Provider Gender:</i> Female <i>License number:</i> A144937 <i>NPI:</i> 1053540534 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 844 JACKMAN ST EL CAJON, CA 92020-3053
NAIK, SHILPA <i>Provider ID:</i> 546498 <i>Provider Gender:</i> Female		

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

C. Directorio de proveedores de atención primaria

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

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: EB, IB, E

Hours: M-SA 9AM-5PM

PINTO, ANITA

Provider ID: 546215

Provider Gender: Female

License number: A75968

NPI: 1477663722

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

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

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

844 JACKMAN ST
EL CAJON, CA 92020-3053

Phone: (619) 442-2560

Fax: (619) 442-7836

After Hours Phone: (619)

442-2560

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: EB, IB, E

Hours: M-SA 9AM-5PM

RODRIGUEZ, ALDO E

Provider ID: 569910

Provider Gender: Male

License number: A134995

NPI: 1508209651

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

875 EL CAJON BLVD

EL CAJON, CA 92020-5714

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

SCOTT, SABRINA I

Provider ID: 206272

Provider Gender: Female

License number: A143939

NPI: 1942599196

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

STENSMAN, LARS M

Provider ID: 478971

Provider Gender: Male

License number: A158569

NPI: 1659638062

Provider English Spoken: Yes

Provider Language(s) Spoken:

Danish, French, Norwegian,
Swedish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION

133 W MAIN ST STE 100

EL CAJON, CA 92020-3325

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

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

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

C. Directorio de proveedores de atención primaria

ARMENTA, JORGE

Provider ID: 185267
Provider Gender: Male
License number: PA13694
NPI: 1346382611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

CHAN, TIFFANY C

Provider ID: 418340
Provider Gender: Female
License number: PA23258
NPI: 1790111607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
 515-2498
Website: www.fhcsd.org

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

LAPINA, LORI L

Provider ID: 206354
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619)
 515-2499
Website: www.fhcsd.org

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

MERCER, KELLY C

Provider ID: 185267
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619)
 312-0347
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

MERCER, KELLY C

Provider ID: 418501
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 1032 BROADWAY
 EL CAJON, CA 92021-7416
Phone: (619) 795-5991
Fax:
After Hours Phone: (619)
 795-5991
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

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

PATEL, SHREYA M

Provider ID: 206354
 Provider Gender: Female
 License number: PA18719
 NPI: 1447468137
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

SABET, ALEENA

Provider ID: 206272
 Provider Gender: Female
 License number: PA56757
 NPI: 1578959987
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

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

TURNER, ERIC M

Provider ID: 206354
 Provider Gender: Male
 License number: PA55067
 NPI: 1669756128
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

ZAMBRANA, GEORGE M

Provider ID: 478971
 Provider Gender: Male
 License number: PA16673

NPI: 1104836659
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDATION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax:
 After Hours Phone: (619) 873-8940
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

PODIATRIST

CHARP, KENNETH G

Provider ID: 478971
 Provider Gender: Male
 License number: DPM1536
 NPI: 1841384203
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDATION
 133 W MAIN ST STE 100
 EL CAJON, CA 92020-3325
 Phone: (619) 873-8940
 Fax:
 After Hours Phone: (619) 873-8940
 Website:

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C. Directorio de proveedores de atención primaria

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

JUAREZ, LETICIA J

Provider ID: 418340
 Provider Gender: Female
 License number: DPM5661
 NPI: 1508393778
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE P

Provider ID: 418340
 Provider Gender: Male
 License number: PT295173
 NPI: 1497236384

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

DASCENZO, EMILY D

Provider ID: 569910
 Provider Gender: Female
 License number: PT40025
 NPI: 1952982761
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 875 EL CAJON BLVD
 EL CAJON, CA 92020-5714
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes

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

GUTIERREZ, JUSTINE A

Provider ID: 418340
 Provider Gender: Female
 License number: PT292482
 NPI: 1851834873
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

MIGNEA, DAVID S

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

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C. Directorio de proveedores de atención primaria

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

ENCINITAS

CERTIFIED NURSE PRACTITIONER

LEWIS, SARAH

Provider ID: 480243
Provider Gender: Female
License number: NP22697
NPI: 1437497963
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

MACIAS, ALISSA M

Provider ID: 480243
Provider Gender: Female
License number: NP21368
NPI: 1952658445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767

Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

PALEN, BARBARA A

Provider ID: 480243
Provider Gender: Female
License number: NP3108
NPI: 1265447601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008

Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

SCHROEDER, MARY L

Provider ID: 480243
Provider Gender: Female
License number: NP14856
NPI: 1164431664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767

Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

SCHROEDER, MARY L

Provider ID: 480243
Provider Gender: Female
License number: NM1617

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C. Directorio de proveedores de atención primaria

NPI: 1164431664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

SCHROEDER, MARY L
 Provider ID: 480243
 Provider Gender: Female
 License number: RN557074
 NPI: 1164431664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

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

TRUMAN, LAURA L
 Provider ID: 480243
 Provider Gender: Female
 License number: NP19860
 NPI: 1376840231
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

TURNER, DAWN M
 Provider ID: 480243
 Provider Gender: Female
 License number: NP22586
 NPI: 1386988368
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008

Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

ALSTON, VICKIE S
 Provider ID: 480243
 Provider Gender: Female
 License number: NM993
 NPI: 1932209905
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

KARVER CHRISTENSON,

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

C. Directorio de proveedores de atención primaria

ELYSE S

Provider ID: 480243
 Provider Gender: Female
 License number: NMW276
 NPI: 1720098155
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

VENOR, KRISTEN A

Provider ID: 480243
 Provider Gender: Female
 License number: NM235688
 NPI: 1811391261
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website:

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

FAMILY PRACTICE

DSOUZA, LYDIA D

Provider ID: 480243
 Provider Gender: Female
 License number: A114700
 NPI: 1932343746
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 753-7842
 Fax:
 After Hours Phone: (760)
 753-7842
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

NATH, DEVARSHI

Provider ID: 480243
 Provider Gender: Male
 License number: C54157
 NPI: 1275630618

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Bengali
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 753-7842
 Fax:
 After Hours Phone: (760)
 753-7842
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-5PM, F
 8:30AM-5:30PM, SA 9AM-5PM

SAFI, ROOZCHEHR

Provider ID: 480243
 Provider Gender: Female
 License number: A116562
 NPI: 1659563641
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 753-7842
 Fax:
 After Hours Phone: (760)
 753-7842
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None

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

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

C. Directorio de proveedores de atención primaria

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

WILSON, MARITZA K

Provider ID: 480243
Provider Gender: Female
License number: A146931
NPI: 1720465925
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

FQHC

TRUECARE,

Provider ID: 480243
Provider Gender:
License number: 080000638
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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

INTERNAL MEDICINE

HUANG, YUN SAN

Provider ID: 480243
Provider Gender: Female
License number: A128784
NPI: 1306095963
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

JEFFERIS, LAUREN R

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

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

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

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

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

C. Directorio de proveedores de atención primaria

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

Fax:

After Hours Phone: (760)
753-7842

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

PEDIATRICS

BRION, SONJA K

Provider ID: 386639

Provider Gender: Female

License number: A68705

NPI: 1306817317

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego, Scripps Memorial Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL STE
B100

ENCINITAS, CA 92024-1347

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

CLEMENTINO, NANCY A

Provider ID: 386643

Provider Gender: Female

License number: G85653

NPI: 1619948619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Rady Childrens Hospital San
Diego, Scripps Memorial Hospital
Encinitas

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL STE
B100

ENCINITAS, CA 92024-1347

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

MENDENHALL, ANNA K

Provider ID: 386635

Provider Gender: Female

License number: A65279

NPI: 1639140650

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital
Encinitas, Scripps Memorial
Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL STE
B100

ENCINITAS, CA 92024-1347

Phone: (760) 436-4511

Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

METSCH, RANDALL B

Provider ID: 386630

Provider Gender: Male

License number: G69565

NPI: 1619948635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital
Encinitas, Scripps Memorial
Hospital

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

499 N EL CAMINO REAL STE
B100

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

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

C. Directorio de proveedores de atención primaria

ENCINITAS, CA 92024-1347
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

MURPHY, CARMEL C

Provider ID: 480243
Provider Gender: Female
License number: A103940
NPI: 1790824787
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-TH 8AM-5PM, F 8:30AM-5:30PM, SA 9AM-5PM

TERRY, AMANDA R

Provider ID: 386739
Provider Gender: Female
License number: A118540
NPI: 1861770885
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 499 N EL CAMINO REAL STE B100
 ENCINITAS, CA 92024-1347
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

TOLBA, KAMEI B

Provider ID: 386624
Provider Gender: Male
License number: A72066
NPI: 1144221763
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 499 N EL CAMINO REAL STE B100
 ENCINITAS, CA 92024-1347
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 480243
Provider Gender: Female
License number: A131678
NPI: 1922402858
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-TRUECARE
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 753-7842
Fax:
After Hours Phone: (760) 753-7842
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*

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

C. Directorio de proveedores de atención primaria

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

PHYSICIANS ASSISTANT

CHISWICK, GARY R

Provider ID: 480243
Provider Gender: Male
License number: PA22667
NPI: 1174964001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

CRUZ, ASHLEY D

Provider ID: 480243
Provider Gender: Female
License number: PA22997
NPI: 1063851814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST

ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

FORSMAN, SHANA A

Provider ID: 480243
Provider Gender: Female
License number: PA19437
NPI: 1306026737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

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

PADDOCK, DIANA L

Provider ID: 480243

Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-5PM, F
8:30AM-5:30PM, SA 9AM-5PM

RUSSO, KRISTA L

Provider ID: 480243
Provider Gender: Female
License number: PA53036
NPI: 1922471192
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767

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C. Directorio de proveedores de atención primaria

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

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

ESCONDIDO

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 419344

Provider Gender: Male

License number: A36637

NPI: 1295747038

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Providence St
Mary Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606

Fax:

After Hours Phone: (760)

871-0606

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
W

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

CERTIFIED NURSE PRACTITIONER

CARNEY, AMY

Provider ID: 206269

Provider Gender: Female

License number: NP8169

NPI: 1164445227

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax:

After Hours Phone: (760)

520-8200

Website: www.ihsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

DELA CRUZ, ANGELITO L

Provider ID: 206271

Provider Gender: Male

License number: NP95004663

NPI: 1457806366

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900

Fax:

After Hours Phone: (760)

737-6900

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
W

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

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

HACINAS, REYNALDO O

Provider ID: 419344

Provider Gender: Male

License number: NP95003024

NPI: 1215304860

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

1121 E WASHINGTON AVE

ESCONDIDO, CA 92025-2214

Phone: (760) 767-5051

Fax:

After Hours Phone: (760)

767-5051

Website: n

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
W

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

8AM-8PM

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

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

C. Directorio de proveedores de atención primaria

KAHL, NICHOLAS D <i>Provider ID:</i> 519481 <i>Provider Gender:</i> Male <i>License number:</i> NP95006360 <i>NPI:</i> 1821306598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 255 N ASH ST STE 101 ESCONDIDO, CA 92027-3069 <i>Phone:</i> (760) 745-5832 <i>Fax:</i> <i>After Hours Phone:</i> (760) 745-5832 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/120 <i>American Sign Language (ASL):</i> No 🚫 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (760) 745-5832 <i>Fax:</i> <i>After Hours Phone:</i> (760) 745-5832 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/120 <i>American Sign Language (ASL):</i> No 🚫 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM MITCHELL, CATHY A <i>Provider ID:</i> 424775 <i>Provider Gender:</i> Female <i>License number:</i> NP4799 <i>NPI:</i> 1356365365 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🚫 <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	<i>NPI:</i> 1134792245 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Persian <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 255 N ASH ST STE 101 ESCONDIDO, CA 92027-3069 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/120 <i>American Sign Language (ASL):</i> No 🚫 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
KOROGODSKI, ANNA <i>Provider ID:</i> 519481 <i>Provider Gender:</i> Female <i>License number:</i> NP95019424 <i>NPI:</i> 1326634890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 255 N ASH ST STE 101 ESCONDIDO, CA 92027-3069	TEHRAN, SAGHI J <i>Provider ID:</i> 519481 <i>Provider Gender:</i> Female <i>License number:</i> NP95018423	TODD, MIKAYLA S <i>Provider ID:</i> 519481 <i>Provider Gender:</i> Female <i>License number:</i> NP95005999 <i>NPI:</i> 1316478092 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 255 N ASH ST STE 101 ESCONDIDO, CA 92027-3069 <i>Phone:</i> (760) 745-5832 <i>Fax:</i> <i>After Hours Phone:</i> (760) 745-5832

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

C. Directorio de proveedores de atención primaria

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

CHIROPRACTOR

ROBINSON, DEAN A

Provider ID: 206270
Provider Gender: Male
License number: DC12036
NPI: 1851320337
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

FAMILY PRACTICE

AVILA, MICHAEL A

Provider ID: 206270
Provider Gender: Male

License number: A159727
NPI: 1962936450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

BISHOP, MELISSA E

Provider ID: 206271
Provider Gender: Female
License number: C137521
NPI: 1578667077
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900

Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

CASTANER, ZALYA

Provider ID: 206270
Provider Gender: Female
License number: A139490
NPI: 1487072179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

CASTANER, ZALYA

Provider ID: 206271
Provider Gender: Female
License number: A139490
NPI: 1487072179
Provider English Spoken: Yes

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

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

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,TU,TH,F 8AM-5PM, W
 9AM-5PM, SA 9AM-5PM

COBIAN, VANESSA E

Provider ID: 206271
Provider Gender: Female
License number: A145349
NPI: 1134513039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,TU,TH,F 8AM-5PM, W
 9AM-5PM, SA 9AM-5PM

COX, VICTORIA R

Provider ID: 519481
Provider Gender: Female
License number: C171064
NPI: 1093087819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

DELGADO, GEORGE, MD

Provider ID: 318978
Provider Gender: Male
License number: G66807
NPI: 1083639470
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,

Scripps Mercy Hospital, Palomar
 Medical Center, Pomerado
 Hospital
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 362 W MISSION AVE STE 105
 ESCONDIDO, CA 92025-1738
Phone: (760) 741-1224
Fax: (888) 815-1761
After Hours Phone: (760)
 741-1224
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

FERRAILOLO, NATALIE K

Provider ID: 206270
Provider Gender: Female
License number: A152372
NPI: 1306290143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W

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

C. Directorio de proveedores de atención primaria

Hours: M-F 8AM-5PM, SA
8AM-12PM

FERRAIOLO, NATALIE K

Provider ID: 206271
Provider Gender: Female
License number: A152372
NPI: 1306290143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

KAUR, JATINDER

Provider ID: 206270
Provider Gender: Female
License number: A120771
NPI: 1912141391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE

460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

LAI, AMARA J

Provider ID: 206271
Provider Gender: Female
License number: A120348
NPI: 1790912855
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W

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

MCHENRY, KATHRYN D

Provider ID: 206270
Provider Gender: Female
License number: 20A14292
NPI: 1326458373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

MORALES LITCHARD, CARMEN L

Provider ID: 419344
Provider Gender: Female
License number: A140992
NPI: 1033534672
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION

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

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

C. Directorio de proveedores de atención primaria

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760)
871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

NAKAMURA, MELANIE A

Provider ID: 206270
Provider Gender: Female
License number: A107557
NPI: 1104022672
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (760) 520-8100
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

OTANEZ CERVANTES, JORGE A

Provider ID: 419344
Provider Gender: Male
License number: A153220
NPI: 1457734675
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
BORREGO COMMUNITY
HEALTH FOUNDTION
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606

Fax:
After Hours Phone: (760)
871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: SA,SU 8AM-12PM, M-F
8AM-8PM

PATEL, JITENBHAI J

Provider ID: 206269
Provider Gender: Male
License number: A94128
NPI: 1902921406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200
Fax:
After Hours Phone: (760)
520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

PATEL, JITENBHAI J

Provider ID: 206270
Provider Gender: Male
License number: A94128
NPI: 1902921406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100

Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

PATEL, JITENBHAI J

Provider ID: 206271
Provider Gender: Male

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

C. Directorio de proveedores de atención primaria

License number: A94128
 NPI: 1902921406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax:
 After Hours Phone: (760)
 737-6900
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: M,TU,TH,F 8AM-5PM, W
 9AM-5PM, SA 9AM-5PM

RADFORD, JAMES A

Provider ID: 419344
 Provider Gender: Male
 License number: 20A17662
 NPI: 1023188026
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Hemet Valley
 Med Ctr
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214

Phone: (760) 871-0606
 Fax:
 After Hours Phone: (760)
 871-0606
 Website: n
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: SA,SU 8AM-12PM, M-F
 8AM-8PM

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270
 Provider Gender: Female
 License number: A82173
 NPI: 1699706333
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760)
 520-8100
 Website: www.ihsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 8AM-12PM

SAENZ ZAVALA, GUILLERMO

Provider ID: 419344
 Provider Gender: Male
 License number: A153513
 NPI: 1720475478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Riverside
 Community Hosp
 Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
 Phone: (760) 871-0606
 Fax:
 After Hours Phone: (760)
 871-0606
 Website: n
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: SA,SU 8AM-12PM, M-F
 8AM-8PM

SANDHU, BASANT S

Provider ID: 206271
 Provider Gender: Male
 License number: A140398
 NPI: 1265795744
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 German, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE

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C. Directorio de proveedores de atención primaria

728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

SAROKI, KAREN A

Provider ID: 430837
Provider Gender: Female
License number: A105032
NPI: 1215157284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
362 W MISSION AVE STE 105
ESCONDIDO, CA 92025-1738
Phone: (760) 741-1224
Fax: (888) 815-1761
After Hours Phone: (760)
741-1224
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

SCHULTZ, JAMES H

Provider ID: 206270
Provider Gender: Male
License number: G61829
NPI: 1356376164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Palomar
Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
8AM-12PM

SCHULTZ, JAMES H

Provider ID: 206271
Provider Gender: Male
License number: G61829
NPI: 1356376164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Southwest

Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Palomar Medical
Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,TU,TH,F 8AM-5PM, W
9AM-5PM, SA 9AM-5PM

TANTOD, KULIN R

Provider ID: 206270
Provider Gender: Male
License number: A109655
NPI: 1902058928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

THOMPSON, CHERYL E

Provider ID: 206270
Provider Gender: Female
License number: A102687
NPI: 1548429863
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Providence St Jude Medical Center, Tri City Medical Ctr
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

FQHC

CENTRO MEDICO ESCONDIDO,

Provider ID: 419344
Provider Gender:

License number: 550001260
NPI: 1023349883
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: BORREGO COMMUNITY HEALTH FOUNDTION
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270
Provider Gender:
License number: 080000397
NPI: 1598703647
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: IHP-NEIGHBORHOOD HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (360) 462-2752
After Hours Phone: (760) 520-8100

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 080000397
NPI: 1487826772
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: IHP-NEIGHBORHOOD HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 080000483
NPI: 1487826772

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

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760)
 520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NEIGHBORHOOD HEALTHCARE GRAND AVE,

Provider ID: 206269
Provider Gender:
License number: 550000697
NPI: 1487826772
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760)
 520-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes

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

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775
Provider Gender:
License number: 550000511
NPI: 1437335353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760)
 690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271
Provider Gender:
License number: 080000158
NPI: 1720264641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760)
 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL,

Provider ID: 206266
Provider Gender:
License number:
NPI: 1265618185
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760)
 520-8340
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 000/21
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271
Provider Gender:
License number: 080000158
NPI: 1720264641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760)
 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes

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

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

C. Directorio de proveedores de atención primaria

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 519481
 Provider Gender:
 License number:
 NPI: 1801438239
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
 Phone: (760) 745-5832
 Fax:
 After Hours Phone: (760)
 745-5832
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/120
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

GENERAL PRACTICE

WATSON, THOMAS L , MD

Provider ID: 383999
 Provider Gender: Male
 License number: A52193
 NPI: 1104865781
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 303 S JUNIPER ST
 ESCONDIDO, CA 92025-4924
 Phone: (760) 480-9051
 Fax: (760) 480-9054
 After Hours Phone: (760)
 480-9051
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM

WATSON, THOMAS L , MD

Provider ID: 80659
 Provider Gender: Male
 License number: A52193
 NPI: 1104865781
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 301 E WASHINGTON AVE STE
 B
 ESCONDIDO, CA 92025-2855
 Phone: (760) 480-9051
 Fax: (760) 480-9054
 After Hours Phone: (760)
 480-9051
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

CARRERA, JORGE A

Provider ID: 519481
 Provider Gender: Male
 License number: G58033
 NPI: 1184728586
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/120
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

CHEN, MARGARET K

Provider ID: 206270
 Provider Gender: Female
 License number: A61751
 NPI: 1659305084
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Greek, Spanish
 Cultural Competency: No

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

C. Directorio de proveedores de atención primaria

<i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM	W <i>Hours:</i> SA,SU 8AM-12PM, M-F 8AM-8PM LAU, BENISON C <i>Provider ID:</i> 206269 <i>Provider Gender:</i> Male <i>License number:</i> A161074 <i>NPI:</i> 1255726154 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
KAUFER, DAVID I <i>Provider ID:</i> 419344 <i>Provider Gender:</i> Male <i>License number:</i> G80107 <i>NPI:</i> 1710082789 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No BORREGO COMMUNITY HEALTH FOUNDTION 1121 E WASHINGTON AVE ESCONDIDO, CA 92025-2214 <i>Phone:</i> (760) 871-0606 <i>Fax:</i> <i>After Hours Phone:</i> (760) 871-0606 <i>Website:</i> n <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R,	NARAYAN, ARCHANA <i>Provider ID:</i> 206269 <i>Provider Gender:</i> Female <i>License number:</i> A101773 <i>NPI:</i> 1003053950 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Kannada <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-NEIGHBORHOOD HEALTHCARE	RATNIEWSKI, ALFREDO <i>Provider ID:</i> 419344 <i>Provider Gender:</i> Male <i>License number:</i> C42220 <i>NPI:</i> 1689768459 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Hebrew, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center <i>Board Certified Specialty:</i> No BORREGO COMMUNITY HEALTH FOUNDTION 1121 E WASHINGTON AVE ESCONDIDO, CA 92025-2214 <i>Phone:</i> (760) 871-0606 <i>Fax:</i> <i>After Hours Phone:</i> (760) 871-0606 <i>Website:</i> n <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> SA,SU 8AM-12PM, M-F

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

C. Directorio de proveedores de atención primaria

8AM-8PM

TASHER, DEAN C

Provider ID: 206269
 Provider Gender: Male
 License number: A22852
 NPI: 1205817673
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE

1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax:
 After Hours Phone: (760) 520-8200
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

VETTICADEN, SANTOSH J

Provider ID: 206270
 Provider Gender: Male
 License number: C53062
 NPI: 1679102461
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
 Fax:
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 8AM-12PM

PEDIATRICS

AGUILAR, EDITA S

Provider ID: 206266
 Provider Gender: Female
 License number: A56054
 NPI: 1467407411
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8340
 Fax:
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 000/21
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

AGUILAR, EDITA S

Provider ID: 424775
 Provider Gender: Female
 License number: A56054
 NPI: 1467407411
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

ALDANA, NANCY V

Provider ID: 424775
 Provider Gender: Female
 License number: A62467
 NPI: 1558371963
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD

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

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

C. Directorio de proveedores de atención primaria

HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHOW, BYRON C

Provider ID: 206270
Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Medical Center
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

8AM-12PM

COHEN, CARA E

Provider ID: 59178
Provider Gender: Female
License number: G83617
NPI: 1215021274
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Rady Childrens
Hospital San Diego, Palomar
Medical Center, Childrens Hosp
And Resrch Ctr At Oakland
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760)
746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

COULLAHAN, JESSICA M

Provider ID: 102560
Provider Gender: Female
License number: A95336
NPI: 1750579108
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus, Rady

Childrens Hospital San Diego,
Palomar Medical Center
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760)
746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

CURET, ZULMA

Provider ID: 206270
Provider Gender: Female
License number: A119661
NPI: 1841561107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
IHP-NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760)
520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

DOSHI, NEELIMA G

Provider ID: 206266
Provider Gender: Female
License number: A67626
NPI: 1417921578
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8340
Fax:
After Hours Phone: (760) 520-8340
Website: www.iypsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 000/21
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

DOSHI, NEELIMA G

Provider ID: 424775
Provider Gender: Female
License number: A67626
NPI: 1417921578
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

IBRAHIM, MAGED F

Provider ID: 419344
Provider Gender: Male
License number: C141296
NPI: 1306852934
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Riverside Community Hosp
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

LUM HO, RACHEL L

Provider ID: 511573
Provider Gender: Female
License number: A169392
NPI: 1215469283
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

MALEKSHAMRAN, KEYVAN

Provider ID: 419344
Provider Gender: Male
License number: A94845
NPI: 1952466112
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Desert Regional Med Ctr
 Board Certified Specialty: No

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

C. Directorio de proveedores de atención primaria

BORREGO COMMUNITY HEALTH FOUNDTION
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

MARTINEZ, ASHLEY R
Provider ID: 524530
Provider Gender: Female
License number: A146820
NPI: 1649667379
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM
PAYNE, ELIZABETH E
Provider ID: 26991
Provider Gender: Female
License number: G74067
NPI: 1043229305
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Palomar Health Downtown Campus
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

SOCHA, TRACI E
Provider ID: 22973
Provider Gender: Female
License number: 20A7862
NPI: 1669478616
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Palomar

Medical Center
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
215 S HICKORY ST STE 126
ESCONDIDO, CA 92025-4360
Phone: (760) 745-7313
Fax: (760) 745-6360
After Hours Phone: (760) 745-7313
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

STEELE, LAUREN E
Provider ID: 529261
Provider Gender: Female
License number: A132448
NPI: 1780028340
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 200
ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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

C. Directorio de proveedores de atención primaria

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

STERNFELD, SHARON R

Provider ID: 56437
Provider Gender: Female
License number: A61025
NPI: 1184695108
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

STRAZICICH, KARLA A

Provider ID: 206270
Provider Gender: Female
License number: A45413
NPI: 1134154958
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Palomar Medical Center
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM

TELLECHEA-SANCHEZ, SELMIRA

Provider ID: 424775
Provider Gender: Female
License number: G83438
NPI: 1730288747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

WOSK, BERNARD

Provider ID: 419344
Provider Gender: Male
License number: A49350
NPI: 1033154984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 BORREGO COMMUNITY HEALTH FOUNDTION
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax:
After Hours Phone: (760) 871-0606
Website: n
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: SA,SU 8AM-12PM, M-F 8AM-8PM

ZANDKARIMI, FARIBA

Provider ID: 87737
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy General Hospital, Rady Childrens

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

C. Directorio de proveedores de atención primaria

Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 240 W MISSION AVE STE A
 ESCONDIDO, CA 92025-1700
Phone: (760) 747-5400
Fax: (760) 747-2286
After Hours Phone: (760)
 747-5400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN M
Provider ID: 519481
Provider Gender: Male
License number: PA52347
NPI: 1376936120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
Phone: (760) 745-5832
Fax:
After Hours Phone: (760)
 745-5832
Website:
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

SAVILLE, KUN
Provider ID: 206269
Provider Gender: Female
License number: PA51508
NPI: 1518377894
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 850-8200
Fax:
After Hours Phone: (760)
 850-8200
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

SHARPE, NORMA A
Provider ID: 519481
Provider Gender: Female
License number: PA20490
NPI: 1619100237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 255 N ASH ST STE 101
 ESCONDIDO, CA 92027-3069
Phone: (760) 745-5832
Fax:
After Hours Phone: (760)
 745-5832
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/120
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

PODIATRIST

NEGRON, RICARDO J
Provider ID: 206271
Provider Gender: Male
License number: DPM5260
NPI: 1932548393
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence St
 Joseph Hospital
Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax:
After Hours Phone: (760)
 737-6900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

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

C. Directorio de proveedores de atención primaria

♿ Accessibility: P, EB, IB, E, R, W
Hours: M,TU,TH,F 8AM-5PM, W 9AM-5PM, SA 9AM-5PM

REHM, KENNETH B

Provider ID: 206266
Provider Gender: Male
License number: DPM2808
NPI: 1588607766
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Ucsd Medical Ctr, Kindred Hospital San Diego
Board Certified Specialty: No
IHP-NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8340
Fax:

After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 000/21
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

FALLBROOK

FAMILY PRACTICE

PAPALIA, SARAH A

Provider ID: 183910
Provider Gender: Female
License number: A144436
NPI: 1336572676

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-COMMUNITY HEALTH SYSTEM
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: (760) 451-4720
Fax:
After Hours Phone: (760) 451-4720
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

FQHC

FALLBROOK FAMILY HLTH CTR,

Provider ID: 183910
Provider Gender: License number: 080000150
NPI: 1982756086
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: IHP-COMMUNITY HEALTH SYSTEM
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760) 451-4720
Website:

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

PEARSON, LAWRENCE F

Provider ID: 183910
Provider Gender: Male
License number: G37412
NPI: 1538234190
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-COMMUNITY HEALTH SYSTEM
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: (760) 451-4720
Fax:
After Hours Phone: (760) 451-4720
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

PEDIATRICS

DEL RE, AMANDA M

Provider ID: 238960
Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: A129568
NPI: 1548499957
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224
Phone: (760) 451-0070
Fax: (760) 451-1499
After Hours Phone: (760)
 451-0070
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

LINARES, YENDI N
Provider ID: 538068
Provider Gender: Female
License number: A148629
NPI: 1336674886
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp Of Los Angeles, Scripps
 Memorial Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224

Phone: (760) 451-0070
Fax: (760) 451-1499
After Hours Phone: (760)
 451-0070
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

PAIK, JULIANA S
Provider ID: 504522
Provider Gender: Female
License number: A73973
NPI: 1528167087
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224
Phone: (760) 451-0070
Fax: (760) 451-1499
After Hours Phone: (760)
 451-0070
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

ROBINSON, DAISY A
Provider ID: 230579
Provider Gender: Female
License number: A56278
NPI: 1659389740

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 321 E ALVARADO ST
 FALLBROOK, CA 92028-2912
Phone: (760) 723-6200
Fax: (760) 723-6215
After Hours Phone: (760)
 723-6200
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

VU, WENDY
Provider ID: 183910
Provider Gender: Female
License number: A169529
NPI: 1508148370
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
 IHP-COMMUNITY HEALTH
 SYSTEM
 1328 S MISSION RD
 FALLBROOK, CA 92028-4006
Phone: (760) 451-4770
Fax:
After Hours Phone: (760)
 451-4770
Website:
Email:
Medi-Cal Open Panel: Yes

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

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

O'BRIEN, FRANCESCA A

Provider ID: 179678

Provider Gender: Female

License number: NP95005211

NPI: 1649720756

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE

IMPERIAL BEACH, CA

91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)

429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, E, R, W

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

FAMILY PRACTICE

JOHNSON, DANIEL W

Provider ID: 179678

Provider Gender: Male

License number: 20A9393

NPI: 1245311216

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No

IHP-IMPERIAL BEACH HEALTH

CENTER

949 PALM AVE

IMPERIAL BEACH, CA

91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)

429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, E, R, W

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

LEUTE, ERIC J

Provider ID: 179678

Provider Gender: Male

License number: A80832

NPI: 1720171507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: Yes

IHP-IMPERIAL BEACH HEALTH

CENTER

949 PALM AVE

IMPERIAL BEACH, CA

91932-1503

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)

429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, E, R, W

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

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

Provider Gender:

License number: 090000119

NPI: 1790718351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-IMPERIAL BEACH HEALTH
CENTER

949 PALM AVE

IMPERIAL BEACH, CA

91932-1503

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

429-3733

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

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C. Directorio de proveedores de atención primaria

No
 ☞ *Accessibility:* P, EB, E, R, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

INTERNAL MEDICINE

RYAN, DANA A

Provider ID: 179678
Provider Gender: Female
License number: A66830
NPI: 1780609990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH
 CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
 429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, E, R, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678
Provider Gender: Female
License number: A51447
NPI: 1154409035
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH
 CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503
Phone: (619) 429-3733
Fax:
After Hours Phone: (619)
 429-3733
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, E, R, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

JULIAN

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 185180
Provider Gender: Male
License number: A36637
NPI: 1295747038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Long Beach
 Memorial Med Ctr, Providence St
 Mary Medical Center
Board Certified Specialty: No
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 2721 WASHINGTON ST
 JULIAN, CA 92036-9233

Phone: (760) 765-1223
Fax: (760) 765-1278
After Hours Phone: (760)
 765-1223
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

FQHC

JULIAN MEDICAL CENTER,

Provider ID: 185180
Provider Gender:
License number: 080000651
NPI: 1700946969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty:
 BORREGO COMMUNITY
 HEALTH FOUNDTION
 2721 WASHINGTON ST
 JULIAN, CA 92036-9233
Phone: (760) 765-1223
Fax: (760) 765-1278
After Hours Phone: (760)
 765-1223
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

LA JOLLA

PEDIATRICS

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C. Directorio de proveedores de atención primaria

GAINOR, GRETCHEN C

Provider ID: 537752
Provider Gender: Female
License number: G79066
NPI: 1174504757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037-5138
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

GANDHI, SHEETAL N

Provider ID: 282029
Provider Gender: Female
License number: A81898
NPI: 1700858859
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 4150 REGENTS PARK ROW
 STE 355
 LA JOLLA, CA 92037-9102

Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

HUNTER, WENDY L

Provider ID: 377597
Provider Gender: Female
License number: A94607
NPI: 1053515551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp And Resrch Ctr At
 Oakland, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037-5138
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037-5138
Phone: (858) 459-4351
Fax: (858) 459-4399
After Hours Phone: (858) 459-4351
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

JAMES, VERONIQUE M

Provider ID: 9959

Provider Gender: Female
License number: C50068
NPI: 1700857703
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 4150 REGENTS PARK ROW
 STE 355
 LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

LYM, RYAN L

Provider ID: 477104
Provider Gender: Male
License number: A152493
NPI: 1114389491
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7300 GIRARD AVE STE 106
 LA JOLLA, CA 92037-5138

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C. Directorio de proveedores de atención primaria

Phone: (858) 459-4351

Fax:

After Hours Phone: (858)
459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

PARSONS, GENEVIEVE N

Provider ID: 24122

Provider Gender: Female

License number: A91825

NPI: 1699700914

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

7300 GIRARD AVE STE 106

LA JOLLA, CA 92037-5138

Phone: (858) 459-4351

Fax: (858) 459-4399

After Hours Phone: (858)
459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ROBERTS, KENDALL R

Provider ID: 48933

Provider Gender: Male

License number: A66977

NPI: 1265762033

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)
457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: EB, IB, E, R

Hours: M-SA 9AM-5PM

SHAH, MEERA T

Provider ID: 145167

Provider Gender: Female

License number: A111054

NPI: 1720300239

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Scripps Mercy Hospital Chula

Vista, Sharp Chula Vista Med Ctr

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)
457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: EB, IB, E, R

Hours: M-SA 9AM-5PM

TUNG, VIVIAN V

Provider ID: 11291

Provider Gender: Female

License number: A78067

NPI: 1285665133

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

7300 GIRARD AVE STE 106

LA JOLLA, CA 92037-5138

Phone: (858) 459-4351

Fax: (858) 459-4399

After Hours Phone: (858)
459-4351

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

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C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

TWITO, TORY R

Provider ID: 465383

Provider Gender: Female

License number: 20A12114

NPI: 1073838611

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

4150 REGENTS PARK ROW STE 355

LA JOLLA, CA 92037-9102

Phone: (858) 457-2043

Fax: (858) 457-2092

After Hours Phone: (858)

457-2043

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

LA MESA

CARDIOVASCULAR DISEASE

SCHWARTZ, JOSEPH A

Provider ID: 480827

Provider Gender: Male

License number: A36637

NPI: 1295747038

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Providence St

Mary Medical Center

Board Certified Specialty: No

BORREGO COMMUNITY

HEALTH FOUNDTION

8881 FLETCHER PKWY STE

200

LA MESA, CA 91942-3135

Phone: (619) 401-0404

Fax:

After Hours Phone: (619)

401-0404

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

FAMILY PRACTICE

BROWN, ANDREW J

Provider ID: 470836

Provider Gender: Male

License number: A154289

NPI: 1629430814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8881 FLETCHER PKWY STE

205

LA MESA, CA 91942-3187

Phone: (619) 270-4388

Fax: (619) 464-5109

After Hours Phone: (619)

270-4388

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

BROWN, ANDREW J

Provider ID: 470837

Provider Gender: Male

License number: A154289

NPI: 1629430814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8881 FLETCHER PKWY STE

200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax:

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

GURTCH, TIM P

Provider ID: 395107

Provider Gender: Male

License number: C50806

NPI: 1881694776

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

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

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

C. Directorio de proveedores de atención primaria

Hospital, Alvarado Hosp Med Ctr, Alvarado Hospital Llc
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 8875 LA MESA BLVD STE C
 LA MESA, CA 91942-5434
Phone: (619) 668-8100
Fax: (619) 667-2688
After Hours Phone: (619) 668-8100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

FQHC

LA MESA PEDIATRICS,
Provider ID: 480827
Provider Gender:
License number: 550000430
NPI: 1033759311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
BORREGO COMMUNITY HEALTH FOUNDTION
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21

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

INTERNAL MEDICINE

PRABAKER, VENUGOPAL, MD
Provider ID: 41067
Provider Gender: Male
License number: A42653
NPI: 1467401042
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Chinese, Polish, Russian, Spanish, Tagalog, Tamil, Thai
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE I
 LA MESA, CA 91942-7435
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619) 698-0606
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

BULLOCH, EDGAR M
Provider ID: 480827
Provider Gender: Male
License number: A113241
NPI: 1508046376
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

DAVIS, TRACIE L
Provider ID: 480827
Provider Gender: Female
License number: A89865
NPI: 1275680738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Website:
Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

MODI, MONICA N

Provider ID: 480827
Provider Gender: Female
License number: A150637
NPI: 1619116605
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

PAPA, RHETT R

Provider ID: 480827
Provider Gender: Male
License number: 20A11733
NPI: 1063642312
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Grossmont Hospital

Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

PEDIATRICS

ADIGOPULA, BINA

Provider ID: 44140
Provider Gender: Female
License number: A45273
NPI: 1982686200
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942-5963
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619) 698-2184
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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

ALSHEIKH, HUDA Y

Provider ID: 435468
Provider Gender: Female
License number: C133872
NPI: 1487746855
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

ALSHEIKH, HUDA Y

Provider ID: 451191
Provider Gender: Female
License number: C133872
NPI: 1487746855
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No

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

RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942-3187
 Phone: (619) 464-6434
 Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

ALSHEIKH, HUDA Y
 Provider ID: 480827
 Provider Gender: Female
 License number: C133872
 NPI: 1487746855
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
BORREGO COMMUNITY HEALTH FOUNDTION
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
 Phone: (619) 464-6434
 Fax:
 After Hours Phone: (619) 464-6434
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/21
 American Sign Language (ASL): No
 ♿ Accessibility: W

Hours: M-SA 9AM-5PM
CLAY, CORRIE T
 Provider ID: 536652
 Provider Gender: Female
 License number: A91977
 NPI: 1437207750
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
 Phone: (619) 464-6434
 Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

GIANFORTUNE, RACHEL M
 Provider ID: 433091
 Provider Gender: Female
 License number: A94327
 NPI: 1912193301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,

Sharp Memorial Hospital,
 Grossmont Hospital
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
 Phone: (619) 464-6434
 Fax: (619) 464-5109
 After Hours Phone: (619) 464-6434
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

GIANFORTUNE, RACHEL M
 Provider ID: 450501
 Provider Gender: Female
 License number: A94327
 NPI: 1912193301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital,
 Grossmont Hospital
 Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942-3187
 Phone: (619) 464-6434
 Fax:
 After Hours Phone: (619) 464-6434
 Website:

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C. Directorio de proveedores de atención primaria

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

IMUS, PAUL M

Provider ID: 239590
Provider Gender: Male
License number: A124606
NPI: 1104116680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942-3135
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619)
 401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MOFFATT, KYRRA

Provider ID: 275099
Provider Gender: Female
License number: 20A10604
NPI: 1194922419

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942-3135
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619)
 401-0404
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MOLINOS, NICOLE P

Provider ID: 538098
Provider Gender: Female
License number: A166790
NPI: 1538685524
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 6942 UNIVERSITY AVE STE A
 LA MESA, CA 91942-5963

Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619)
 698-2184
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

RONQUILLO, RINA R

Provider ID: 377359
Provider Gender: Female
License number: A99286
NPI: 1407047749
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Rady Childrens
 Hospital San Diego, Sharp Mary
 Birch Hosp For Women And
 Newborns, Sharp Memorial
 Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8881 FLETCHER PKWY STE
 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619)
 464-6434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:

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C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

SHORT, RICHARD L

Provider ID: 60736

Provider Gender: Male

License number: G37177

NPI: 1568552727

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Rady Childrens

Hospital San Diego, Sharp Mary
Birch Hosp For Women And
Newborns

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)

464-6434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA M

Provider ID: 353843

Provider Gender: Female

License number: DC33688

NPI: 1649787607

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

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

9AM-5PM

FAMILY PRACTICE

FERRAIOLO, NATALIE K

Provider ID: 353843

Provider Gender: Female

License number: A152372

NPI: 1306290143

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

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

9AM-5PM

ZAMPELLO, LISA E

Provider ID: 353843

Provider Gender: Female

License number: A145924

NPI: 1477933026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

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

9AM-5PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843

Provider Gender:

License number: 080000483

NPI: 1932384120

Provider English Spoken: Yes

Provider Language(s) Spoken:

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

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax: (360) 462-2744

After Hours Phone: (858)
 218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

Accessibility: W

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

INTERNAL MEDICINE

MCFARLAND, NATHAN A

Provider ID: 353843

Provider Gender: Male

License number: A75411

NPI: 1265462196

Provider English Spoken: Yes

Provider Language(s) Spoken:

Italian, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

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

9AM-5PM

PREVENTATIVE MEDICINE

GENERAL

MANNINO, ELIZABETH A

Provider ID: 353843

Provider Gender: Female

License number: A43914

NPI: 1548290463

Provider English Spoken: Yes

Provider Language(s) Spoken:

Italian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

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

9AM-5PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE L

Provider ID: 419139

Provider Gender: Female

License number: NP95009933

NPI: 1831557024

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, T

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

9AM-5PM

SMITH, SHARON T

Provider ID: 419139

Provider Gender: Female

License number: RN428876

NPI: 1780603597

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T

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

SMITH, SHARON T

Provider ID: 419139

Provider Gender: Female

License number: NP15444

NPI: 1780603597

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T

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

TOTH, JESSICA R

Provider ID: 419139

Provider Gender: Female

License number: NP95001050

NPI: 1578993788

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License number: A107323

NPI: 1629289400

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: 419139

Provider Gender:

License number: 550001268

NPI: 1427282466

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550

Fax: (619) 825-9577

After Hours Phone: (619)
515-2550

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T

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

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

C. Directorio de proveedores de atención primaria

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

INTERNAL MEDICINE

GALLARES, DANIEL D

Provider ID: 419139
Provider Gender: Male
License number: A165925
NPI: 1245689488
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 419139
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 419139
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 419139
Provider Gender: Female
License number: 20A6763
NPI: 1932147329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Palomar Medical Center,
Pomerado Hospital, Rady
Childrens Hospital San Diego,
Sharp Coronado Hosp And
Healthcare Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

C. Directorio de proveedores de atención primaria

No ☞ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM CARTER, KHALIL J <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM CERVANTES, SANDRA M <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Female <i>License number:</i> A118095 <i>NPI:</i> 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	<i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM DE MIK, TRAVIS J <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Male <i>License number:</i> A108228 <i>NPI:</i> 1629277322 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i>	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Female <i>License number:</i> A148014 <i>NPI:</i> 1457794752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2550 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2550 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, T <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM HANLEY, LAUREN E <i>Provider ID:</i> 419139 <i>Provider Gender:</i> Female <i>License number:</i> C174771 <i>NPI:</i> 1053392035
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM	LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM	Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM MELENDEZ BERRIOS, IARA DEL M Provider ID: 419139 Provider Gender: Female License number: A114181 NPI: 1740514249 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, T Hours: M-F 9AM-5PM, SA 9AM-5PM
LIPSCHITZ, LISA S Provider ID: 419139 Provider Gender: Female License number: A72005 NPI: 1649208711 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY	LOEFFLER, ALLISON M Provider ID: 419139 Provider Gender: Female License number: A116680 NPI: 1700073962 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2550 Fax: After Hours Phone: (619) 515-2550 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No	RODRIGUEZ JEREZ, ROBERTO D Provider ID: 419139 Provider Gender: Male License number: A154298 NPI: 1710316450 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 419139
Provider Gender: Female
License number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

SINGH, RASHMI

Provider ID: 419139
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 419139
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 419139
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital,

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C. Directorio de proveedores de atención primaria

Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619)
515-2500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

PEDIATRICS

SLEIMAN, JOSEPH N
Provider ID: 419139
Provider Gender: Male
License number: A102060
NPI: 1093976748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

PHYSICIANS ASSISTANT

FLEMING, DAVID E
Provider ID: 419139
Provider Gender: Male
License number: PA12416
NPI: 1932329505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

GODDARD, SHANNON

Provider ID: 419139
Provider Gender: Female
License number: PA56072
NPI: 1780961417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619)
515-2550
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA
9AM-5PM

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO V
Provider ID: 417102
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:

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C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-6PM, F
 8AM-5PM, SA 9AM-5PM

AQUINO, FELINO V

Provider ID: 418302
Provider Gender: Male
License number: NP22974
NPI: 1356684781
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM
DACANAY-HERMAN, ROWENA S
Provider ID: 417102
Provider Gender: Female
License number: NP22378
NPI: 1144689175
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-TH 8AM-6PM, F
 8AM-5PM, SA 9AM-5PM

DACANAY-HERMAN, ROWENA S
Provider ID: 418302
Provider Gender: Female
License number: NP22378
NPI: 1144689175
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

DHARKAR SURBER, SAPNA A

Provider ID: 185270
Provider Gender: Female
License number: NP95013257
NPI: 1538707765
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

C. Directorio de proveedores de atención primaria

No 📶 <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-W,F,SA 9AM-5PM, TH 8AM-2PM LIM, IMELDA B <i>Provider ID:</i> 417102 <i>Provider Gender:</i> Female <i>License number:</i> NP95000203 <i>NPI:</i> 1093130395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No OPERATION SAMAHAN 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No 📶 <i>Accessibility:</i> W <i>Hours:</i> M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM LIM, IMELDA B <i>Provider ID:</i> 418302 <i>Provider Gender:</i> Female <i>License number:</i> NP95000203 <i>NPI:</i> 1093130395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No	<i>Hospital Affiliation:</i> Board Certified Specialty: No OPERATION SAMAHAN 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No 📶 <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM LUM, YUIN-WAH <i>Provider ID:</i> 418930 <i>Provider Gender:</i> Female <i>License number:</i> NP95010663 <i>NPI:</i> 1942764477 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 <i>Phone:</i> (619) 515-2399 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2399 <i>Website:</i> www.fhcsd.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL):	No 📶 <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M,W,F 8:30AM-3:30PM, TU,TH 10:30AM-5:30PM, SA 9AM-5PM MACARIOLA, AMPARO E <i>Provider ID:</i> 417102 <i>Provider Gender:</i> Female <i>License number:</i> NP95001709 <i>NPI:</i> 1932505401 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No OPERATION SAMAHAN 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No 📶 <i>Accessibility:</i> W <i>Hours:</i> M-TH 8AM-6PM, F 8AM-5PM, SA 9AM-5PM MILTON, JILL F <i>Provider ID:</i> 185270 <i>Provider Gender:</i> Female <i>License number:</i> NP13612 <i>NPI:</i> 1598757270 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

NEVAREZ, IRENE

Provider ID: 185270
Provider Gender: Female
License number: NP95009891
NPI: 1003166646
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 564-8765
Fax:
After Hours Phone: (619)
 564-8765
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

OCHOA, ERLINDA A

Provider ID: 185270
Provider Gender: Female
License number: NP4430
NPI: 1346437464
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518

Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

REAL, MARIA F

Provider ID: 185270
Provider Gender: Female
License number: NP17328
NPI: 1548450471
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

REID, EMILY

Provider ID: 185270
Provider Gender: Female
License number: NP95002766
NPI: 1083081467
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

VERDUZCO GONZALEZ, AURORA B

Provider ID: 185270
Provider Gender: Female
License number: NP95001961
NPI: 1932452323
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 185270
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

WILLIAMS, BREAHA A

Provider ID: 185270
Provider Gender: Female
License number: NP95001840
NPI: 1063884864
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ♿ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA M

Provider ID: 227418
Provider Gender: Female
License number: A167529
NPI: 1316310840
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

BAEZ, BEATRICE E

Provider ID: 417102
Provider Gender: Female
License number: A74777
NPI: 1245372507
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-TH 8AM-6PM, F
 8AM-5PM, SA 9AM-5PM

BAEZ, BEATRICE E , MD
Provider ID: 455677
Provider Gender: Female
License number: A74777
NPI: 1245372507
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
Email:
Medi-Cal Open Panel: Yes

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

CAMPBELL, BRIANNA N
Provider ID: 227418
Provider Gender: Female
License number: A157488
NPI: 1316479892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax:

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

CARRIEDO CENICEROS, MARIA T
Provider ID: 227412
Provider Gender: Female
License number: A78373
NPI: 1295746618
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 336-2300
Fax:
After Hours Phone: (619)
 336-2300
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

CEVALLOS, JAMES E
Provider ID: 227412
Provider Gender: Male
License number: A55469
NPI: 1720181829
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:

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C. Directorio de proveedores de atención primaria

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

DAMASCO GUTIERREZ, DAISY C

Provider ID: 418302
Provider Gender: Female
License number: A66993
NPI: 1700841582
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
Board Certified Specialty: No
 OPERATION SAMAHAN
 2101 GRANGER AVE
 NATIONAL CITY, CA
 91950-6208
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

DANGREMOND, ADRIANNA J

Provider ID: 418930
Provider Gender: Female
License number: G138260
NPI: 1508802828

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
Phone: (619) 515-2399
Fax:
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M,W,F 8:30AM-3:30PM,
 TU,TH 10:30AM-5:30PM, SA
 9AM-5PM

DILLON, MAYRA M

Provider ID: 227412
Provider Gender: Female
License number: A112571
NPI: 1629232715
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412

Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

HERNANDEZ, JOANNA L

Provider ID: 227412
Provider Gender: Female
License number: A138919
NPI: 1154749315
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 1136 D AVE
 NATIONAL CITY, CA
 91950-3412
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

HOLTZMAN, AURY L

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

C. Directorio de proveedores de atención primaria

Provider ID: 418302 Provider Gender: Male License number: A43970 NPI: 1548462567 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No OPERATION SAMAHAN 2101 GRANGER AVE NATIONAL CITY, CA 91950-6208 Phone: (844) 200-2624 Fax: After Hours Phone: (844) 200-2624 Website: www.operationsamahan.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM	Phone: (619) 515-2399 Fax: After Hours Phone: (619) 515-2399 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T Hours: M,W,F 8:30AM-3:30PM, TU,TH 10:30AM-5:30PM, SA 9AM-5PM	9AM-5PM MCKENNETT, MARIANNE A , MD Provider ID: 447682 Provider Gender: Female License number: G57243 NPI: 1376639666 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Board Certified Specialty: No COMMUNITY CARE IPA LLC 2835 HIGHLAND AVE STE B NATIONAL CITY, CA 91950-7406 Phone: (844) 200-2426 Fax: (619) 477-2628 After Hours Phone: (844) 200-2426 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM
LANUZA, MARK J Provider ID: 418930 Provider Gender: Male License number: 20A18460 NPI: 1992230593 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856	LAW, KAREN Provider ID: 227418 Provider Gender: Female License number: A138534 NPI: 1205253150 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Chula Vista Comm Hosp Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA	MEDINA, ALEXANDER R Provider ID: 361428 Provider Gender: Male License number: A133539 NPI: 1467714436 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH

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C. Directorio de proveedores de atención primaria

CENTER
330 E 8TH ST
NATIONAL CITY, CA
91950-2312
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

MOHAMED, NADIA A

Provider ID: 227418
Provider Gender: Female
License number: A146819
NPI: 1477947364
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,

T, W
Hours: M-F 8AM-5PM, SA
9AM-5PM
NAVARRO, VANESSA M
Provider ID: 227418
Provider Gender: Female
License number: A113624
NPI: 1952563421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

NIKZAD, JASON

Provider ID: 361428
Provider Gender: Male
License number: 20A12653
NPI: 1508121674
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
330 E 8TH ST
NATIONAL CITY, CA
91950-2312
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

OCEGUEDA, JOSHUA A

Provider ID: 227412
Provider Gender: Male
License number: A165184
NPI: 1336643345
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
1136 D AVE
NATIONAL CITY, CA
91950-3412
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:

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

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

C. Directorio de proveedores de atención primaria

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

PALACIOS, YELENNIA

Provider ID: 503938
Provider Gender: Female
License number: A152662
NPI: 1285088013
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2835 HIGHLAND AVE STE A
NATIONAL CITY, CA
91950-7406
Phone: (619) 474-4451
Fax:
After Hours Phone: (619) 474-4451
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License number: A103218
NPI: 1023278314
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: (619) 428-4463

Fax:

After Hours Phone: (619)

428-4463

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

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

SERPAS, SHAILA, MD

Provider ID: 449099

Provider Gender: Female

License number: G74728

NPI: 1124039136

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

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

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2835 HIGHLAND AVE
NATIONAL CITY, CA
91950-7404

Phone: (844) 800-2426

Fax:

After Hours Phone: (844)

800-2426

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SEVILLA, MARIANITO D , MD

Provider ID: 80910

Provider Gender: Male

License number: A37097

NPI: 1760574727

Provider English Spoken: Yes

Provider Language(s) Spoken: Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2340 E 8TH ST STE D
NATIONAL CITY, CA
91950-2875

Phone: (619) 470-7007

Fax: (619) 470-9379

After Hours Phone: (619)

470-7007

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

SNOOK, BRIAN P

Provider ID: 227418

Provider Gender: Male

License number: 20A11518

NPI: 1295977353

Provider English Spoken: Yes

Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax: (619) 259-2806
After Hours Phone: (619)
 662-4100

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

VELASQUEZ, SHARON F

Provider ID: 227418
Provider Gender: Female
License number: A71304
NPI: 1972732584
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619)
 662-4100

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

FQHC

**FAMILY HEALTH CTR SD
 NATIONAL CITY,**
Provider ID: 418930
Provider Gender:
License number: 550000465
NPI: 1417409228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0053
After Hours Phone: (619)
 515-2399
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M,W,F 8:30AM-3:30PM,
 TU,TH 10:30AM-5:30PM, SA
 9AM-5PM

LA MAESTRA FAMILY CLINIC

INC,
Provider ID: 185270
Provider Gender:
License number:
NPI: 1336353721
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

**OPERATION SAMAHAN -
 NATIONAL C,**
Provider ID: 417102
Provider Gender:
License number: 090000183
NPI: 1801907449
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 OPERATION SAMAHAN
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410

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

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

C. Directorio de proveedores de atención primaria

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-TH 8AM-6PM, F
8AM-5PM, SA 9AM-5PM

OPERATION SAMAHAN GRANGER SCHOOL BASED,

Provider ID: 418302

Provider Gender:

License number: 550002622

NPI: 1205134517

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

OPERATION SAMAHAN

2101 GRANGER AVE

NATIONAL CITY, CA

91950-6208

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

Provider Gender:

License number:

NPI: 1003869363

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

1136 D AVE

NATIONAL CITY, CA

91950-3412

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

SAN YSIDRO HEALTH

PARADISE HILLS,

Provider ID: 227418

Provider Gender:

License number:

NPI: 1598907487

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

2400 E 8TH ST STE A

NATIONAL CITY, CA

91950-2956

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

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

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428

Provider Gender:

License number:

NPI: 1851757215

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

330 E 8TH ST

NATIONAL CITY, CA

91950-2312

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

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C. Directorio de proveedores de atención primaria

9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185270
 Provider Gender: Male
 License number: G45632
 NPI: 1548281322
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Providence Santa Rosa Memorial Hospital, Ucsd Medical Ctr, Stanford Health Care, California Pacific Med Ctr, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda University Comm Med Ctr, Regional Medical Ctr Of San Jose
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax:
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M-W,F,SA 9AM-5PM, TH 8AM-2PM

INTERNAL MEDICINE

ALTAVAS, VALERIE C , MD

Provider ID: 57963
 Provider Gender: Female
 License number: C52243
 NPI: 1245231174
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 209
 NATIONAL CITY, CA
 91950-2970
 Phone: (619) 470-7000
 Fax: (619) 470-7009
 After Hours Phone: (619) 470-7000
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

BAUTISTA, ARWINNAH

Provider ID: 383973
 Provider Gender: Female
 License number: C51221
 NPI: 1073579173
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Memorial Hospital
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

1430 E PLAZA BLVD STE E19A
 NATIONAL CITY, CA
 91950-3690
 Phone: (619) 434-2813
 Fax: (855) 631-3720
 After Hours Phone: (619) 434-2813
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

BRAVERMAN, IRA R

Provider ID: 10635
 Provider Gender: Male
 License number: A37912
 NPI: 1124039755
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 610 EUCLID AVE STE 201
 NATIONAL CITY, CA
 91950-2952
 Phone: (619) 267-8181
 Fax: (619) 479-6750
 After Hours Phone: (619) 267-8181
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

HEKMAT, RAZI D

Provider ID: 78388
 Provider Gender: Male
 License number: A75886
 NPI: 1871501205
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 610 EUCLID AVE STE 201
 NATIONAL CITY, CA
 91950-2952
 Phone: (619) 267-8181
 Fax: (619) 479-6750
 After Hours Phone: (619)
 267-8181
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 227412
 Provider Gender: Female
 License number: G71855
 NPI: 1124176102
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 1136 D AVE

NATIONAL CITY, CA

91950-3412
 Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619)
 428-4463
 Website: www.ihsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 361428
 Provider Gender: Female
 License number: G71855
 NPI: 1124176102
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 330 E 8TH ST
 NATIONAL CITY, CA
 91950-2312
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

NIGUIDULA, TROY H

Provider ID: 413964
 Provider Gender: Male
 License number: A92543
 NPI: 1215948849
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 610 EUCLID AVE
 NATIONAL CITY, CA
 91950-2951
 Phone: (619) 267-8181
 Fax: (619) 479-6750
 After Hours Phone: (619)
 267-8181
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM

SACAMAY, ELENA MARIA B , MD

Provider ID: 109971
 Provider Gender: Female
 License number: A63422
 NPI: 1992777882
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

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C. Directorio de proveedores de atención primaria

655 EUCLID AVE STE 209
NATIONAL CITY, CA
91950-2970
Phone: (619) 470-7000
Fax: (619) 470-7009
After Hours Phone: (619)
470-7000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

TIANGCO, IRINEO D
Provider ID: 103444
Provider Gender: Male
License number: A52655
NPI: 1245322213
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Paradise Valley
Hospital
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2340 E 8TH ST STE J
NATIONAL CITY, CA
91950-2876
Phone: (619) 479-0320
Fax: (619) 479-0367
After Hours Phone: (619)
479-0320
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Hours: M-SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA
Provider ID: 227418
Provider Gender: Female
License number: A118227
NPI: 1851667661
Provider English Spoken: Yes
Provider Language(s) Spoken:
Fataleka
Cultural Competency: No
Hospital Affiliation: Hemet Global
Medical Center, Menifee Global
Medical Center, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

FAKSH, ARIJ
Provider ID: 185270
Provider Gender: Female
License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Tri City
Medical Ctr, Scripps Mercy
Hospital, Scripps Green Hospital,
Scripps Memorial Hospital
Encinitas, Scripps Memorial
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-W,F,SA 9AM-5PM, TH
8AM-2PM

PEDIATRICS

ASSER, SETH M
Provider ID: 227412
Provider Gender: Male
License number: G46444
NPI: 1205049038
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

IHP-SAN YSIDRO HEALTH CENTER

1136 D AVE
NATIONAL CITY, CA

91950-3412

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)

662-4100

Website: www.iypsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-5PM

BAILONY, AHMAD L

Provider ID: 146949

Provider Gender: Male

License number: A108665

NPI: 1790914422

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Paradise Valley

Hospital, Sharp Chula Vista Med

Ctr, Sharp Memorial Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

655 EUCLID AVE STE 205

NATIONAL CITY, CA

91950-2967

Phone: (619) 470-1945

Fax: (619) 475-5048

After Hours Phone: (619)

470-1945

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

BAILONY, MOHAMMED T

Provider ID: 30132

Provider Gender: Male

License number: A34406

NPI: 1376625913

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Paradise Valley

Hospital, Sharp Chula Vista Med

Ctr, Rady Childrens Hospital San

Diego, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH

NETWORK

655 EUCLID AVE STE 205

NATIONAL CITY, CA

91950-2967

Phone: (619) 470-1945

Fax: (619) 475-5048

After Hours Phone: (619)

470-1945

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

BARBADILLO, TERESITA T

Provider ID: 84258

Provider Gender: Female

License number: A38742

NPI: 1952416695

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

655 EUCLID AVE STE 201

NATIONAL CITY, CA

91950-2966

Phone: (619) 267-8601

Fax: (619) 267-2242

After Hours Phone: (619)

267-8601

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

W

Hours: M-SA 9AM-5PM

BONSU, BEMA K

Provider ID: 227412

Provider Gender: Male

License number: C55180

NPI: 1932106986

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr

At Oakland

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

1136 D AVE

NATIONAL CITY, CA

91950-3412

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

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

C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihapsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM	8AM-2PM FRESNO, BLANCA I Provider ID: 102433 Provider Gender: Female License number: A45205 NPI: 1346258787 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 655 EUCLID AVE STE 207 NATIONAL CITY, CA 91950-2968 Phone: (619) 475-4575 Fax: (619) 475-4578 After Hours Phone: (619) 475-4575 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 610 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2953 Phone: (619) 527-7700 Fax: (619) 527-3226 After Hours Phone: (619) 527-7700 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM
CONE, STEPHANIE E Provider ID: 185270 Provider Gender: Female License number: A123929 NPI: 1437444858 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego Board Certified Specialty: No LA MAESTRA FAMILY CLINIC 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518 Phone: (619) 434-7308 Fax: After Hours Phone: (619) 434-7308 Website: www.lamaestra.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, W Hours: M-W,F,SA 9AM-5PM, TH	GARCIA, RAFAEL A Provider ID: 84954 Provider Gender: Male License number: A50715 NPI: 1053414086 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego	HIPOLITO, CECILIA L Provider ID: 418930 Provider Gender: Female License number: A145850 NPI: 1770999773 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 Phone: (619) 515-2399 Fax: After Hours Phone: (619) 515-2399 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No

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

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M,W,F 8:30AM-3:30PM,
 TU,TH 10:30AM-5:30PM, SA
 9AM-5PM

RANA, DEBORAH T

Provider ID: 227418
Provider Gender: Female
License number: G88347
NPI: 1033191457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 2400 E 8TH ST STE A
 NATIONAL CITY, CA
 91950-2956
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 T, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

UY, CARMELITA

Provider ID: 424443
Provider Gender: Female
License number: C50548
NPI: 1154431484
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Paradise
 Valley Hospital
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2340 E 8TH ST STE E
 NATIONAL CITY, CA
 91950-2870
Phone: (619) 216-8500
Fax: (619) 216-8511
After Hours Phone: (619)
 216-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

VALENCIA, MARILES F

Provider ID: 104060
Provider Gender: Female
License number: A54929
NPI: 1275541625
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 655 EUCLID AVE STE 207
 NATIONAL CITY, CA
 91950-2968
Phone: (619) 475-4575
Fax: (619) 475-4578
After Hours Phone: (619)
 475-4575

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

VITUG, ELENA P

Provider ID: 74967
Provider Gender: Female
License number: A44349
NPI: 1285746214
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise
 Valley Hospital, Sharp Chula
 Vista Med Ctr, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 502 EUCLID AVE STE 201
 NATIONAL CITY, CA
 91950-2949
Phone: (619) 475-6204
Fax: (619) 475-5174
After Hours Phone: (619)
 475-6204
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

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C. Directorio de proveedores de atención primaria

Provider ID: 185270
Provider Gender: Male
License number: PA13694
NPI: 1346382611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308

Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

BANGS, SASHA S

Provider ID: 418930
Provider Gender: Female
License number: PA55660
NPI: 1720524374
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856

Phone: (619) 515-2399
Fax:
After Hours Phone: (619)
 515-2399
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M,W,F 8:30AM-3:30PM,
 TU,TH 10:30AM-5:30PM, SA
 9AM-5PM

MARTINEZ MURGUIA, IRENE

Provider ID: 185270
Provider Gender: Female
License number: PA20296
NPI: 1447492889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308

Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

MERCER, KELLY C

Provider ID: 185270
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax:
After Hours Phone: (619)
 434-7308
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R, W
Hours: M-W,F,SA 9AM-5PM, TH
 8AM-2PM

OCEANSIDE

CERTIFIED NURSE PRACTITIONER

BAEK, KILHYO K

Provider ID: 206341
Provider Gender: Female
License number: NP95003571
NPI:
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY

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C. Directorio de proveedores de atención primaria

CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-4PM

BEECHER-VAN HORN, JOANNE B

Provider ID: 296476
Provider Gender: Female
License number: NP95013879
NPI: 1457665424
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 8AM-5PM

BROMAN, GRETCHEN L

Provider ID: 206341
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-3500
Fax:
After Hours Phone: (760)
631-3500
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-4PM

BROMAN, GRETCHEN L

Provider ID: 402434
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

BROMAN, GRETCHEN L

Provider ID: 402436
Provider Gender: Female
License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-4PM

HALGEDAHL, YI T

Provider ID: 206341
Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (844) 308-5003
Fax:

After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 402434
Provider Gender: Male
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 402436
Provider Gender: Male
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC

517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:

After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 206341

Provider Gender: Female
License number: NP95003447
NPI: 1245695006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 402434
Provider Gender: Female
License number: NP95003447
NPI: 1245695006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

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C. Directorio de proveedores de atención primaria

Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760) 631-5000
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

LEWIS, SARAH

Provider ID: 296476
 Provider Gender: Female
 License number: NP22697
 NPI: 1437497963
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax:
 After Hours Phone: (760) 757-4566
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 8AM-5PM

LEWIS, SARAH

Provider ID: 480315
 Provider Gender: Female
 License number: NP22697
 NPI: 1437497963

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

MACIAS, ALISSA M

Provider ID: 296476
 Provider Gender: Female
 License number: NP21368
 NPI: 1952658445
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax:
 After Hours Phone: (760) 757-4566
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 8AM-5PM

MACIAS, ALISSA M

Provider ID: 480315
 Provider Gender: Female
 License number: NP21368
 NPI: 1952658445
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8AM-5PM, SA 9AM-5PM

PALEN, BARBARA A

Provider ID: 296476
 Provider Gender: Female
 License number: NP3108
 NPI: 1265447601
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415

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C. Directorio de proveedores de atención primaria

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)
757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

PALEN, BARBARA A

Provider ID: 480315

Provider Gender: Female

License number: NP3108

NPI: 1265447601

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)
736-6767

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

SCHAEPE, RHODORA A

Provider ID: 402434

Provider Gender: Female

License number: RN410247

NPI: 1700974789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

SCHAEPE, RHODORA A

Provider ID: 402434

Provider Gender: Female

License number: NP7791

NPI: 1700974789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

TRUMAN, LAURA L

Provider ID: 296476

Provider Gender: Female

License number: NP19860

NPI: 1376840231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)
757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

TRUMAN, LAURA L

Provider ID: 480315

Provider Gender: Female

License number: NP19860

NPI: 1376840231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

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

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

C. Directorio de proveedores de atención primaria

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

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

TURNER, DAWN M

Provider ID: 296476

Provider Gender: Female

License number: NP22586

NPI: 1386988368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

TURNER, DAWN M

Provider ID: 480315

Provider Gender: Female

License number: NP22586

NPI: 1386988368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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

9AM-5PM

VAUGHAN, ROBERT R

Provider ID: 296476

Provider Gender: Male

License number: NP95012681

NPI: 1780233221

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

CERTIFIED REGISTERED

NURSE MIDWIFE

VENOR, KRISTEN A

Provider ID: 296476

Provider Gender: Female

License number: NM235688

NPI: 1811391261

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

ZAMORA-FLYR, MARIA M

Provider ID: 402434

Provider Gender: Female

License number: NM1634

NPI: 1194938647

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

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

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C. Directorio de proveedores de atención primaria

OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-4PM
ESPINOSA-SILVA, YAMINAH
Provider ID: 402434
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 402436
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-4PM

FATLAND, SARAH E

Provider ID: 206341
Provider Gender: Female
License number: 20A18374
NPI: 1831354026
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

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

C. Directorio de proveedores de atención primaria

No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM HAIDER, ABDULLAH T <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Male <i>License number:</i> A64435 <i>NPI:</i> 1730156936 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 757-4566 <i>Fax:</i> <i>After Hours Phone:</i> (760) 757-4566 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 8AM-5PM KETCHEL, CLINT <i>Provider ID:</i> 206341 <i>Provider Gender:</i> Male <i>License number:</i> A135564 <i>NPI:</i> 1699038125 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish, Syriac <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City	Medical Ctr, Whittier Hospital Medical Center <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 4700 N RIVER RD OCEANSIDE, CA 92057-6043 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM KETCHEL, CLINT <i>Provider ID:</i> 402434 <i>Provider Gender:</i> Male <i>License number:</i> A135564 <i>NPI:</i> 1699038125 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish, Syriac <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 818 PIER VIEW WAY OCEANSIDE, CA 92054-2803	<i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M,TU,TH,F 8AM-5PM, W 8AM-7PM, SA 9AM-4PM KETCHEL, CLINT <i>Provider ID:</i> 402436 <i>Provider Gender:</i> Male <i>License number:</i> A135564 <i>NPI:</i> 1699038125 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish, Syriac <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 517 N HORNE ST OCEANSIDE, CA 92054-2518 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM KURUKULASURIYA, DAYANTHI N <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Female <i>License number:</i> 20A15689 <i>NPI:</i> 1205246865 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 757-4566 <i>Fax:</i> <i>After Hours Phone:</i> (760) 757-4566 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 8AM-5PM LAROCQUE, MICHAEL A <i>Provider ID:</i> 206341 <i>Provider Gender:</i> Male <i>License number:</i> C34614 <i>NPI:</i> 1306879549 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC	4700 N RIVER RD OCEANSIDE, CA 92057-6043 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM PANICKER, CIBU <i>Provider ID:</i> 206341 <i>Provider Gender:</i> Male <i>License number:</i> A149340 <i>NPI:</i> 1235492760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Tri City Medical Ctr <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 4700 N RIVER RD OCEANSIDE, CA 92057-6043 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM	9AM-4PM PONSFORD, DIANA O <i>Provider ID:</i> 402436 <i>Provider Gender:</i> Female <i>License number:</i> 20A17371 <i>NPI:</i> 1407204969 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Tri City Medical Ctr <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 517 N HORNE ST OCEANSIDE, CA 92054-2518 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM SAFI, ROOZCHEHR <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Female <i>License number:</i> A116562 <i>NPI:</i> 1659563641 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (760) 757-4566

Fax: (760) 757-3004

After Hours Phone: (760)
757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

SIMATI, BETH L

Provider ID: 206341

Provider Gender: Female

License number: C156596

NPI: 1417187618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Whittier

Hospital Medical Center, Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

9AM-4PM

SIMATI, BETH L

Provider ID: 402434

Provider Gender: Female

License number: C156596

NPI: 1417187618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Whittier

Hospital Medical Center, Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

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

SIMATI, BETH L

Provider ID: 402436

Provider Gender: Female

License number: C156596

NPI: 1417187618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Whittier

Hospital Medical Center, Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY
CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

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

9AM-4PM

FQHC

TRUECARE,

Provider ID: 296476

Provider Gender:

License number: 080000240

NPI: 1245246917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 736-8740

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

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

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

C. Directorio de proveedores de atención primaria

TRUECARE, <i>Provider ID:</i> 480247 <i>Provider Gender:</i> <i>License number:</i> 080000637 <i>NPI:</i> 1245246917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> (760) 736-8740 <i>After Hours Phone:</i> (760) 966-3306 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM	<i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-VISTA COMMUNITY CLINIC 517 N HORNE ST OCEANSIDE, CA 92054-2518 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM
TRUECARE, <i>Provider ID:</i> 480247 <i>Provider Gender:</i> <i>License number:</i> 080000531 <i>NPI:</i> 1245246917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> (760) 736-8740 <i>After Hours Phone:</i> (760) 966-3306	TRUECARE, <i>Provider ID:</i> 480315 <i>Provider Gender:</i> <i>License number:</i> 080000240 <i>NPI:</i> 1245246917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-TRUECARE 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 433-3155 <i>Fax:</i> (760) 736-8740 <i>After Hours Phone:</i> (760) 433-3155 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	VISTA COMMUNITY CLINIC PIER VIEW WAY, <i>Provider ID:</i> 402434 <i>Provider Gender:</i> <i>License number:</i> 080000510 <i>NPI:</i> 1649363375 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-VISTA COMMUNITY CLINIC 818 PIER VIEW WAY OCEANSIDE, CA 92054-2803 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i>
	VISTA COMMUNITY CLINIC HORNE STREET, <i>Provider ID:</i> 402436 <i>Provider Gender:</i> <i>License number:</i> 080000745 <i>NPI:</i> 1437245412 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	

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

C. Directorio de proveedores de atención primaria

No
 ☯ Accessibility: W
 Hours: M,TU,TH,F 8AM-5PM, W
 8AM-7PM, SA 9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206341

Provider Gender:

License number: 080000002

NPI: 1851300123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY
CLINIC

4700 N RIVER RD STE B
OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

☯ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206341

Provider Gender:

License number: 080000002

NPI: 1316501562

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY

CLINIC
 4700 N RIVER RD STE B
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

☯ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-4PM

GENERAL PRACTICE

RONAN, KEVIN J

Provider ID: 402436

Provider Gender: Male

License number: G77176

NPI: 1225017353

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial
Hospital Encinitas

Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

517 N HORNE ST
OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

☯ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-4PM

INTERNAL MEDICINE

CHONG, ILSONG J

Provider ID: 296476

Provider Gender: Male

License number: C152937

NPI: 1831240159

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

☯ Accessibility: W

Hours: M-SA 8AM-5PM

DELGADILLO, ALEXANDER

Provider ID: 206341

Provider Gender: Male

License number: G89399

NPI: 1245298769

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Temecula

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

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

C. Directorio de proveedores de atención primaria

Valley Hospital Inc
Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-4PM

DELGADILLO, ALEXANDER

Provider ID: 402434

Provider Gender: Male

License number: G89399

NPI: 1245298769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Temecula

Valley Hospital Inc

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

DELGADILLO, ALEXANDER

Provider ID: 402436

Provider Gender: Male

License number: G89399

NPI: 1245298769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Temecula

Valley Hospital Inc

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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

9AM-4PM

GOMEZ, DENISE Y

Provider ID: 296476

Provider Gender: Female

License number: A66289

NPI: 1407871817

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City
Medical Ctr, Palomar Medical
Center

Board Certified Specialty: No
IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 757-3004

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

JEFFERIS, LAUREN R

Provider ID: 296476

Provider Gender: Female

License number: A80674

NPI: 1346354776

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

605 CROUCH ST BLDG C

OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

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

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

C. Directorio de proveedores de atención primaria

JEFFERIS, LAUREN R <i>Provider ID:</i> 480247 <i>Provider Gender:</i> Female <i>License number:</i> A80674 <i>NPI:</i> 1346354776 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 891-4667 <i>Fax:</i> <i>After Hours Phone:</i> (760) 891-4667 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM	Scripps Memorial Hospital <i>Board Certified Specialty:</i> No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 8AM-5PM	No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM
INTERVENTIONAL CARDIOLOGY		
MOUSSAVIAN, MEHRAN <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Male <i>License number:</i> 20A7241 <i>NPI:</i> 1689788234 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital,	CALHOUN, CHANELLE R <i>Provider ID:</i> 480247 <i>Provider Gender:</i> Female <i>License number:</i> G75390 <i>NPI:</i> 1437166709 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Board Certified Specialty:</i> No IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 891-4667 <i>Fax:</i> <i>After Hours Phone:</i> (760) 891-4667 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	CHEN, MING <i>Provider ID:</i> 480247 <i>Provider Gender:</i> Female <i>License number:</i> A56246 <i>NPI:</i> 1851525505 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Delano Regional Med Ctr <i>Board Certified Specialty:</i> No IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 891-4667 <i>Fax:</i> <i>After Hours Phone:</i> (760) 891-4667 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM CURLEY, EDWARD R <i>Provider ID:</i> 480247 <i>Provider Gender:</i> Male <i>License number:</i> A73814 <i>NPI:</i> 1164434312 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr

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

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
IHP-TRUECARE
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667

Fax:
After Hours Phone: (760)
891-4667
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-4:30PM

DANIELS, SARAH R

Provider ID: 433806
Provider Gender: Female
License number: A130872
NPI: 1730446527
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Rady Childrens
Hospital San Diego, Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 130B
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010
Fax:
After Hours Phone: (760)
547-1010
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM

FALLON, TINA U

Provider ID: 480247
Provider Gender: Female
License number: A161739
NPI: 1013371004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 891-4667

Fax:
After Hours Phone: (760)
891-4667
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
8AM-4:30PM

GUNTA, SUJANA S

Provider ID: 402434
Provider Gender: Female
License number: A109056
NPI: 1932304342
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Marathi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY

CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M,TU,TH,F 8AM-5PM, W
8AM-7PM, SA 9AM-4PM

KRAMER, MELISSA S

Provider ID: 469759
Provider Gender: Female
License number: A146613
NPI: 1467833467
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760)
547-1010
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

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

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

C. Directorio de proveedores de atención primaria

MACINTYRE, ELIZABETH T <i>Provider ID:</i> 543354 <i>Provider Gender:</i> Female <i>License number:</i> A172352 <i>NPI:</i> 1336520766 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY BLDG B # 130 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1010 <i>Fax:</i> (760) 547-1011 <i>After Hours Phone:</i> (760) 547-1010 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3731 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM MILLER, DONALD T <i>Provider ID:</i> 433589 <i>Provider Gender:</i> Male <i>License number:</i> G69645 <i>NPI:</i> 1154356582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Palomar Medical Center, Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY BLDG B # 130 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1010 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1010 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM PERKINS, RACHEL E <i>Provider ID:</i> 435952 <i>Provider Gender:</i> Female <i>License number:</i> A123956 <i>NPI:</i> 1427398320 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 130B OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1010 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1010 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
MCCAMMACK, BRADLEY D <i>Provider ID:</i> 206341 <i>Provider Gender:</i> Male <i>License number:</i> A130883 <i>NPI:</i> 1629368857 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 4700 N RIVER RD OCEANSIDE, CA 92057-6043	<i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3731 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-4PM MILLER, DONALD T <i>Provider ID:</i> 433589 <i>Provider Gender:</i> Male <i>License number:</i> G69645 <i>NPI:</i> 1154356582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Palomar Medical Center, Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY BLDG B # 130 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1010 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1010 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM PERKINS, RACHEL E <i>Provider ID:</i> 435952 <i>Provider Gender:</i> Female <i>License number:</i> A123956 <i>NPI:</i> 1427398320 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 130B OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1010 <i>Fax:</i> <i>After Hours Phone:</i> (760) 547-1010 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM PERTL, URSULA G <i>Provider ID:</i> 69068 <i>Provider Gender:</i> Female <i>License number:</i> A89997 <i>NPI:</i> 1609947464 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No

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

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY # B
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1010

Fax: (760) 547-1011

After Hours Phone: (760) 547-1010

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

ZACHRY, ALISON D

Provider ID: 296476

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri City Medical Ctr

Board Certified Specialty: No
IHP-TRUECARE

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax: (760) 757-3004

After Hours Phone: (760) 757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 8AM-5PM

ZACHRY, ALISON D

Provider ID: 480247

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri City Medical Ctr

Board Certified Specialty: No
IHP-TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 891-4667

Fax:

After Hours Phone: (760)

891-4667

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-F 8AM-5PM, SA 8AM-4:30PM

ZACHRY, ALISON D

Provider ID: 480315

Provider Gender: Female

License number: A131678

NPI: 1922402858

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri City Medical Ctr

Board Certified Specialty: No
IHP-TRUECARE

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 891-4667

Fax:

After Hours Phone: (760)

891-4667

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

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

PHYSICIANS ASSISTANT

ABRESCH, LISA M

Provider ID: 296476

Provider Gender: Female

License number: PA21227

NPI: 1114298130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415

Phone: (760) 757-4566

Fax:

After Hours Phone: (760)

757-4566

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

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

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

C. Directorio de proveedores de atención primaria

American Sign Language (ASL): OCEANSIDE, CA 92054-4415
No
Accessibility: W
Hours: M-SA 8AM-5PM

BLAKESPEAR, JEREMY D

Provider ID: 480315
Provider Gender: Male
License number: PA19825
NPI: 1750474177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 433-3155
Fax:
After Hours Phone: (760)
 433-3155
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
 9AM-5PM

CHISWICK, GARY R

Provider ID: 296476
Provider Gender: Male
License number: PA22667
NPI: 1174964001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C

Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
 757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 8AM-5PM

CHISWICK, GARY R

Provider ID: 480247
Provider Gender: Male
License number: PA22667
NPI: 1174964001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Board Certified Specialty: No
 IHP-TRUECARE
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax:
After Hours Phone: (760)
 966-3306
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 8AM-5PM, SA
 8AM-4:30PM

CRUZ, ASHLEY D

Provider ID: 296476
Provider Gender: Female

License number: PA22997
NPI: 1063851814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
Phone: (760) 757-4566
Fax:
After Hours Phone: (760)
 757-4566
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 8AM-5PM

CRUZ, ASHLEY D

Provider ID: 480247
Provider Gender: Female
License number: PA22997
NPI: 1063851814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax:
After Hours Phone: (760)
 966-3306
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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

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

C. Directorio de proveedores de atención primaria

No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM CRUZ, ASHLEY D <i>Provider ID:</i> 480315 <i>Provider Gender:</i> Female <i>License number:</i> PA22997 <i>NPI:</i> 1063851814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 433-3155 <i>Fax:</i> <i>After Hours Phone:</i> (760) 433-3155 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 757-4566 <i>Fax:</i> <i>After Hours Phone:</i> (760) 757-4566 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 8AM-5PM PADDOCK, DIANA L <i>Provider ID:</i> 480247 <i>Provider Gender:</i> Female <i>License number:</i> PA52175 <i>NPI:</i> 1447657804 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Board Certified Specialty:</i> No IHP-TRUECARE 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> <i>After Hours Phone:</i> (760) 966-3306 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 8AM-4:30PM	RANDALLS, JESSICA L <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Female <i>License number:</i> PA54982 <i>NPI:</i> 1538410550 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 8AM-5PM RUSSO, KRISTA L <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Female <i>License number:</i> PA53036 <i>NPI:</i> 1922471192 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 757-4566 <i>Fax:</i> <i>After Hours Phone:</i> (760) 757-4566 <i>Website:</i> www.ihpsocal.org
PADDOCK, DIANA L <i>Provider ID:</i> 296476 <i>Provider Gender:</i> Female <i>License number:</i> PA52175 <i>NPI:</i> 1447657804 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Board Certified Specialty:</i> No		

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

C. Directorio de proveedores de atención primaria

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

RUSSO, KRISTA L

Provider ID: 480247
 Provider Gender: Female
 License number: PA53036
 NPI: 1922471192
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:

Board Certified Specialty: No
 IHP-TRUECARE
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306

Fax:
 After Hours Phone: (760)
 966-3306
 Website:

Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 8AM-4:30PM

RUSSO, KRISTA L

Provider ID: 480315
 Provider Gender: Female
 License number: PA53036
 NPI: 1922471192
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No

IHP-TRUECARE
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 433-3155
 Fax:
 After Hours Phone: (760)
 433-3155
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

SCHALCK, KRISTEN S

Provider ID: 296476
 Provider Gender: Female
 License number: PA14416
 NPI: 1760587919
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax:
 After Hours Phone: (760)
 757-4566
 Website: www.ihpsocal.org

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

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
 Provider Gender: Female
 License number: A120771
 NPI: 1912141391
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Urdu
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 92064
 Phone: (858) 218-3000
 Fax:

After Hours Phone: (858)
 218-3000
 Website:

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

FQHC

NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER,

Provider ID: 481187
 Provider Gender:
 License number: 550004321
 NPI: 1023518768
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:

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

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C. Directorio de proveedores de atención primaria

Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License number: A119661

NPI: 1841561107

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

PHYSICIANS ASSISTANT

BALDWIN, DONNA J

Provider ID: 481187

Provider Gender: Female

License number: PA23310

NPI: 1649692369

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000

Fax:

After Hours Phone: (858)

218-3000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

PAUMA VALLEY

FAMILY PRACTICE

AYON MARTINEZ, CARLOS X

Provider ID: 206267

Provider Gender: Male

License number: A114419

NPI: 1154583128

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

16650 HIGHWAY 76

PAUMA VALLEY, CA

92061-9524

Phone: (760) 742-9919

Fax:

After Hours Phone: (760)

742-9919

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8AM-4:30PM, SA

9AM-5PM

SCHULTZ, JAMES H

Provider ID: 206267

Provider Gender: Male

License number: G61829

NPI: 1356376164

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Greek, Spanish

Cultural Competency: No

Hospital Affiliation: Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, Palomar Medical

Center

Board Certified Specialty: No

IHP-NEIGHBORHOOD

HEALTHCARE

16650 HIGHWAY 76

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

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

C. Directorio de proveedores de atención primaria

PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax:
After Hours Phone: (760)
742-9919
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

FQHC

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY,

Provider ID: 206267
Provider Gender:
License number: 080000611
NPI: 1407031693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-NEIGHBORHOOD
HEALTHCARE
16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760)
742-9919
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

POWAY

FAMILY PRACTICE

IONESCU, LUDMILLA N , MD

Provider ID: 505945
Provider Gender: Female
License number: C130451
NPI: 1568498145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD FL 3
POWAY, CA 92064-2437
Phone: (858) 675-3210
Fax: (858) 613-2938
After Hours Phone: (858)
675-3210
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

MALETZ, LOUIS, MD

Provider ID: 70756
Provider Gender: Male
License number: G50801
NPI: 1013983055
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish

Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 613-2938
After Hours Phone: (858)
675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM

MERAM, SUSAN, MD

Provider ID: 38214
Provider Gender: Female
License number: A53727
NPI: 1588630735
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: St Johns
Regional Medical Center
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 613-2938
After Hours Phone: (858)
675-3100
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

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

C. Directorio de proveedores de atención primaria

No ☞ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM MIR, YUSRA A , MD Provider ID: 104018 Provider Gender: Female License number: A101298 NPI: 1932435757 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Spanish, Urdu Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3100 Fax: (858) 613-2932 After Hours Phone: (858) 675-3100 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ☞ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM PUTNAM, RICHARD L , MD Provider ID: 506946 Provider Gender: Male License number: G50068 NPI: 1861468027 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 300 POWAY, CA 92064-2437	Phone: (858) 675-3100 Fax: (858) 207-0039 After Hours Phone: (858) 675-3100 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☞ Accessibility: Hours: M-SA 9AM-5PM INTERNAL MEDICINE ANDERSEN, STUART J Provider ID: 546663 Provider Gender: Male License number: A162976 NPI: 1205270956 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3293 Fax: (858) 673-5187 After Hours Phone: (858) 675-3293 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ☞ Accessibility: Hours: M-SA 9AM-5PM CARTY, DAVID J , MD Provider ID: 53596 Provider Gender: Male License number: A41501	NPI: 1205802568 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3293 Fax: (858) 487-3823 After Hours Phone: (858) 675-3293 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ☞ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM DURE-SMITH, BELINDA A , MD Provider ID: 25721 Provider Gender: Female License number: A52257 NPI: 1487620662 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Pomerado Hospital Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3293 Fax: (858) 487-3823 After Hours Phone: (858) 675-3293 Website: Email: Medi-Cal Open Panel: Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

MAMARIL, DENNIS M , MD

Provider ID: 53861
 Provider Gender: Male
 License number: A90180
 NPI: 1508832601
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3293
 Fax: (858) 613-5192
 After Hours Phone: (858) 675-3293
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

PRESANT, LARRY A , MD

Provider ID: 57940
 Provider Gender: Male
 License number: G42579
 NPI: 1790751956
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3100
 Fax: (858) 618-1523
 After Hours Phone: (858) 675-3100
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

PEDIATRICS

BOWERS, HILARY M

Provider ID: 41436
 Provider Gender: Female
 License number: A78338
 NPI: 1891884318
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital, Palomar Medical Center
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
 Phone: (858) 673-3340
 Fax: (858) 673-1075
 After Hours Phone: (858) 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):

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

CHANG, IRENE S

Provider ID: 462361
 Provider Gender: Female
 License number: A73533
 NPI: 1790756799
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Pomerado Hospital

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
 Phone: (858) 673-3340
 Fax:
 After Hours Phone: (858) 673-3340
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM

DIEP, THUAN M

Provider ID: 462977
 Provider Gender: Male
 License number: A146685
 NPI: 1477948479
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp

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

C. Directorio de proveedores de atención primaria

Memorial Hospital, Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

GRAHAM, STUART N , MD

Provider ID: 508717
Provider Gender: Male
License number: G70035
NPI: 1083680060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 300
 POWAY, CA 92064-2437
Phone: (858) 924-1900
Fax: (858) 924-1949
After Hours Phone: (858) 924-1900
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R

Hours: M-SA 9AM-5PM

KHATTRI, SONAL, MD

Provider ID: 506565
Provider Gender: Female
License number: A105678
NPI: 1013997303
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 15611 POMERADO RD FL 3
 POWAY, CA 92064-2437
Phone: (858) 675-3170
Fax: (858) 675-0518
After Hours Phone: (858) 675-3170
Website:
Email:

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

LINDBACK, SARAH M

Provider ID: 161834
Provider Gender: Female
License number: A117823
NPI: 1427345487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

LOSTETTER, ADRIENNE L

Provider ID: 261797
Provider Gender: Female
License number: C54914
NPI: 1881607984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp For Women And Newborns, Pomerado Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

MOREIRA, LUCILA K

Provider ID: 523761
Provider Gender: Female
License number: 20A15437
NPI: 1104846567
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

MORTIMER, DORI R

Provider ID: 230552
Provider Gender: Female
License number: A75016
NPI: 1417928417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp For Women And Newborns, Pomerado Hospital
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax: (858) 673-1075
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

RAMGREN, AILEEN N

Provider ID: 397707
Provider Gender: Female
License number: 20A14418
NPI: 1356785505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15725 POMERADO RD STE 203
 POWAY, CA 92064-2058
Phone: (858) 673-3340
Fax:
After Hours Phone: (858) 673-3340
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM

RENDLER, NATHAN

Provider ID: 30205
Provider Gender: Male
License number: G64231
NPI: 1275531337
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish, Yiddish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Pomerado Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 15525 POMERADO RD STE B1 # 1
 POWAY, CA 92064-2425
Phone: (858) 487-8333
Fax: (858) 487-0856
After Hours Phone: (858) 487-8333
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

SHANMUGAM, CHERYL L , MD

Provider ID: 509248
Provider Gender: Female
License number: G86245
NPI: 1053387134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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C. Directorio de proveedores de atención primaria

15611 POMERADO RD STE 300
POWAY, CA 92064-2437

Phone: (858) 675-3100

Fax: (858) 618-1523

After Hours Phone: (858)
675-3100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

License number: A68063

NPI: 1396744066

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Rady Childrens

Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

15525 POMERADO RD STE B1

POWAY, CA 92064-2425

Phone: (858) 487-8333

Fax: (858) 487-0856

After Hours Phone: (858)

484-4003

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

RAMONA

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH N

Provider ID: 449438

Provider Gender: Female

License number: NP18874

NPI: 1083845069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

220 ROTANZI ST

RAMONA, CA 92065-2583

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

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

8AM-12PM

LEWIS, SARAH

Provider ID: 449438

Provider Gender: Female

License number: NP22697

NPI: 1437497963

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

220 ROTANZI ST

RAMONA, CA 92065-2583

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

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

8AM-12PM

PALEN, BARBARA A

Provider ID: 449438

Provider Gender: Female

License number: NP3108

NPI: 1265447601

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

220 ROTANZI ST

RAMONA, CA 92065-2583

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R

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

8AM-12PM

TRUMAN, LAURA L

Provider ID: 449438

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C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: NP19860
NPI: 1376840231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
 220 ROTANZI ST
 RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
 8AM-12PM

TURNER, DAWN M

Provider ID: 449438
Provider Gender: Female
License number: NP22586
NPI: 1386988368
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
 220 ROTANZI ST
 RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
 8AM-12PM

CERTIFIED REGISTERED NURSE MIDWIFE

VENOR, KRISTEN A

Provider ID: 449438
Provider Gender: Female
License number: NM235688
NPI: 1811391261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
 220 ROTANZI ST
 RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
 8AM-12PM

FAMILY PRACTICE

HARDISON, CHARLES L

Provider ID: 82228
Provider Gender: Male
License number: G70382
NPI: 1538475793
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Natividad
 Medical Center
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 211 13TH ST
 RAMONA, CA 92065-2711
Phone: (760) 789-5160
Fax: (858) 613-2938
After Hours Phone: (760)
 789-5160
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM

KASCH, JANINE

Provider ID: 78918
Provider Gender: Female
License number: 20A5832
NPI: 1871569087
Provider English Spoken: Yes
Provider Language(s) Spoken:
 German, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Pomerado Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 211 13TH ST
 RAMONA, CA 92065-2711
Phone: (760) 789-5160
Fax: (760) 788-7983
After Hours Phone: (760)
 789-5160
Website:
Email:

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

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

MILLER, JERRY, MD

Provider ID: 247912
Provider Gender: Male
License number: A119340
NPI: 1871543199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
211 13TH ST
RAMONA, CA 92065-2711
Phone: (760) 789-5160
Fax: (760) 788-5892
After Hours Phone: (760) 789-5160
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

FQHC

TRUECARE,

Provider ID: 449438
Provider Gender:
License number: 080000149
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty:
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA 8AM-12PM

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 449438
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 891-4667
Fax:
After Hours Phone: (760) 891-4667
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA

8AM-12PM

YUNG, DORIS A

Provider ID: 449438
Provider Gender: Female
License number: A89893
NPI: 1730386863
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 891-4667
Fax:

After Hours Phone: (760) 891-4667
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA 8AM-12PM

PHYSICIANS ASSISTANT

CHISWICK, GARY R

Provider ID: 449438
Provider Gender: Male
License number: PA22667
NPI: 1174964001
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Board Certified Specialty: No
IHP-TRUECARE

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C. Directorio de proveedores de atención primaria

220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
8AM-12PM

CRUZ, ASHLEY D

Provider ID: 449438
Provider Gender: Female
License number: PA22997
NPI: 1063851814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
8AM-12PM

PADDOCK, DIANA L

Provider ID: 449438

Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
8AM-12PM

REIFENBERGER, JODY L

Provider ID: 449438
Provider Gender: Female
License number: PA22669
NPI: 1386741072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
8AM-12PM

RUSSO, KRISTA L

Provider ID: 449438
Provider Gender: Female
License number: PA53036
NPI: 1922471192
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
220 ROTANZI ST
RAMONA, CA 92065-2583
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-F 8AM-5PM, SA
8AM-12PM

SCHALCK, KRISTEN S

Provider ID: 449438
Provider Gender: Female
License number: PA14416
NPI: 1760587919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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

C. Directorio de proveedores de atención primaria

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

220 ROTANZI ST
RAMONA, CA 92065-2583

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R

Hours: M-F 8AM-5PM, SA
8AM-12PM

ZANGEN, ROCHELLE L

Provider ID: 449438

Provider Gender: Female

License number: PA51494

NPI: 1447681150

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE

220 ROTANZI ST
RAMONA, CA 92065-2583

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R

Hours: M-F 8AM-5PM, SA
8AM-12PM

SAN DIEGO

CARDIOLOGY

NARAYANAN, MEENA R

Provider ID: 206363

Provider Gender: Female

License number: A113448

NPI: 1508170697

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Chula
Vista Med Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

CARDIOVASCULAR DISEASE

BLUM, RICHARD I

Provider ID: 417937

Provider Gender: Male

License number: G53758

NPI: 1043310030

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-TH 8AM-9PM, F

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

CHRISTOPHY, ANTONIO C

Provider ID: 417937

Provider Gender: Male

License number: 20A15088

NPI: 1871897678

Provider English Spoken: Yes

Provider Language(s) Spoken:

Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Memorial
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-TH 8AM-9PM, F

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

GARIBYAN, VARTAN N

Provider ID: 417937

Provider Gender: Male

License number: 20A12504

NPI: 1790084143

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Scripps

Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-TH 8AM-9PM, F

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

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO V

Provider ID: 418535

Provider Gender: Male

License number: NP22974

NPI: 1356684781

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD

STE B10 AND B11

SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM,

SA 9AM-5PM

AQUINO, FELINO V

Provider ID: 432308

Provider Gender: Male

License number: NP22974

NPI: 1356684781

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

ARTS, SERENA C

Provider ID: 403583

Provider Gender: Female

License number: NP10769

NPI: 1801881552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

BELEN, NEZER B

Provider ID: 206363

Provider Gender: Male

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

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C. Directorio de proveedores de atención primaria

License number: NP95009292
 NPI: 1386120723
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, ME
 Hours: M-SA 9AM-5PM

BERNARDO-GREGORY, ELSIE S

Provider ID: 418535
 Provider Gender: Female
 License number: NP15257
 NPI: 1588808349
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844)
 200-2426

Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

BESTERFELDT, LYDIA

Provider ID: 482070
 Provider Gender: Female
 License number: NP95013060
 NPI: 1265929442
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858)
 810-8700
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

BURNS, DELLA E

Provider ID: 233597
 Provider Gender: Female
 License number: NP7413

NPI: 1871577023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
 Phone: (619) 563-0250
 Fax:
 After Hours Phone: (619)
 563-0250
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

CELESTIN-RAMSEY, AKANKE J

Provider ID: 451167
 Provider Gender: Female
 License number: NP8563
 NPI: 1447450275
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA 8AM-4PM CHASE, AVA LOU C Provider ID: 206353 Provider Gender: Female License number: NP95000602 NPI: 1164496386 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM CHASE, AVA LOU C Provider ID: 206360 Provider Gender: Female License number: NP95000602 NPI: 1164496386 Provider English Spoken: Yes Provider Language(s) Spoken:	Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: ME Hours: M-SA 9AM-5PM CONNER, PAMELA M Provider ID: 417937 Provider Gender: Female License number: NP18098 NPI: 1770558967 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL):	No ♿ Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM DACANAY-HERMAN, ROWENA S Provider ID: 432308 Provider Gender: Female License number: NP22378 NPI: 1144689175 Provider English Spoken: Yes Provider Language(s) Spoken: Tagalog Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No OPERATION SAMAHAN 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007 Phone: (844) 200-2426 Fax: After Hours Phone: (844) 200-2426 Website: www.operationsamahan.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM DHARKAR SURBER, SAPNA A Provider ID: 185268 Provider Gender: Female License number: NP95013257 NPI: 1538707765 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No LA MAESTRA FAMILY CLINIC
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C. Directorio de proveedores de atención primaria

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

DOW, RAEHELLE L
Provider ID: 482070
Provider Gender: Female
License number: NP15667
NPI: 1184679789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

ESTRELLA, SUE K
Provider ID: 417101
Provider Gender: Female
License number: NP95005047
NPI: 1083137541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

EVERHART, ANNE MICHELLE G
Provider ID: 432308
Provider Gender: Female
License number: NP95002876
NPI: 1821464835
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

FERRARI, GINA E
Provider ID: 482070
Provider Gender: Female
License number: NP95016072
NPI: 1922639301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

GARCIA, JOHNNY
Provider ID: 206363

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C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: NP95007000
NPI: 1932622156
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

GOLDFINGER, SARAH N
Provider ID: 206360
Provider Gender: Female
License number: NP95011313
NPI: 1134686744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

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

GRAHAM, DEBRA J
Provider ID: 451167
Provider Gender: Female
License number: NP15657
NPI: 1790757623
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

GREER, TRACY P
Provider ID: 206362
Provider Gender: Female
License number: NP95002226
NPI: 1891101754
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

HARRINGTON, BARBARA LORRAINE R
Provider ID: 185268
Provider Gender: Female
License number: NP17008
NPI: 1659579134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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

C. Directorio de proveedores de atención primaria

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

HA, THU M

Provider ID: 206046
Provider Gender: Female
License number: NP95010517
NPI: 1346443983
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:

After Hours Phone: (858)
 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 T, W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

HA, THU M

Provider ID: 482070
Provider Gender: Female
License number: NP95010517
NPI: 1346443983
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

HILLIARD, THESALONICA P

Provider ID: 417101
Provider Gender: Female
License number: NP95010585
NPI: 1861956724
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax:

After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-4:30PM, SA

9AM-5PM

HOANG, CHI Q

Provider ID: 482070
Provider Gender: Female
License number: NP95004600
NPI: 1902350994
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:

After Hours Phone: (858)
 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

HOGAN, ROSELYNN JOY S

Provider ID: 206360
Provider Gender: Female
License number: NP17852
NPI: 1205019510
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

HOGAN, ROSELYNN JOY S

Provider ID: 206362

Provider Gender: Female

License number: NP17852

NPI: 1205019510

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

INSTONE, SUSAN L

Provider ID: 233532

Provider Gender: Female

License number: NP4858

NPI: 1710223268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

INSTONE, SUSAN L

Provider ID: 482070

Provider Gender: Female

License number: NP4858

NPI: 1710223268

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

JOHNSON, SHAWNA AKIKO H

Provider ID: 233597

Provider Gender: Female

License number: NP95002518

NPI: 1922237809

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax:

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

KHAN, MATTHEW P

Provider ID: 206353

Provider Gender: Male

License number: NP17838

NPI: 1942456124

Provider English Spoken: Yes

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

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

C. Directorio de proveedores de atención primaria

<i>Provider Language(s) Spoken:</i> No <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📶 <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	No 📶 <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 810-8700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 810-8700 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📶 <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM
KHAN, MATTHEW P <i>Provider ID:</i> 417987 <i>Provider Gender:</i> Male <i>License number:</i> NP17838 <i>NPI:</i> 1942456124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2426 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2426 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	KI, TRISH H <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> NP23847 <i>NPI:</i> 1376840199 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📶 <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	KLOBERDANZ, KELSEY L <i>Provider ID:</i> 417937 <i>Provider Gender:</i> Female <i>License number:</i> NP95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2545 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2545 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📶 <i>Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F

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

C. Directorio de proveedores de atención primaria

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

LIEBER, CAROL L

Provider ID: 517403

Provider Gender: Female

License number: NP20849

NPI: 1487889846

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH CENTER

316 25TH ST

SAN DIEGO, CA 92102-3016

Phone: (619) 238-5551

Fax:

After Hours Phone: (619)

238-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

LIM, IMELDA B

Provider ID: 417101

Provider Gender: Female

License number: NP95000203

NPI: 1093130395

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-4:30PM, SA

9AM-5PM

LOVE, VICKI L

Provider ID: 206363

Provider Gender: Female

License number: NP17362

NPI: 1699759134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

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

Hours: M-SA 9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 417101

Provider Gender: Female

License number: NP95001709

NPI: 1932505401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (800) 200-2426

Fax:

After Hours Phone: (800)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-4:30PM, SA

9AM-5PM

MACARIOLA, AMPARO E

Provider ID: 418535

Provider Gender: Female

License number: NP95001709

NPI: 1932505401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10 AND B11

SAN DIEGO, CA 92129-2889

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

C. Directorio de proveedores de atención primaria

Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM

MACARIOLA, AMPARO E
 Provider ID: 432308
 Provider Gender: Female
 License number: NP95001709
 NPI: 1932505401
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 9855 ERMA RD STE 105
 SAN DIEGO, CA 92131-1007
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website:
 www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

MARTINEZ, CAROLYN M

Provider ID: 214492
 Provider Gender: Female
 License number: NP22031
 NPI: 1609101997
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-IMPERIAL BEACH HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
 Phone: (619) 429-3733
 Fax:
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, IB, E, R, T, W
 Hours: M,F 8:30AM-5PM, TU-TH 8:30AM-8PM, SA 9AM-5PM

MELTZER, VIRGINIA N
 Provider ID: 233532
 Provider Gender: Female
 License number: NP95015948
 NPI: 1821684390
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058
 Fax:
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/22
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 8AM-2PM

MILTON, JILL F
 Provider ID: 185268
 Provider Gender: Female
 License number: NP13612
 NPI: 1598757270
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

NEVAREZ, IRENE
 Provider ID: 185268
 Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: NP95009891
NPI: 1003166646
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 564-8765

Fax:
After Hours Phone: (619) 564-8765
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

NOCEDA, ANA B

Provider ID: 233532
Provider Gender: Female
License number: NP19505
NPI: 1386971760
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058
Fax:
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 8AM-2PM

NOCEDA, ANA B

Provider ID: 482070
Provider Gender: Female
License number: NP19505
NPI: 1386971760
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

O'BRIEN, FRANCESCA A

Provider ID: 214492
Provider Gender: Female
License number: NP95005211
NPI: 1649720756
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-IMPERIAL BEACH HEALTH CENTER
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax:
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, IB, E, R, T, W
Hours: M,F 8:30AM-5PM, TU-TH 8:30AM-8PM, SA 9AM-5PM

OCAMPO, ELAINE R

Provider ID: 206046
Provider Gender: Female
License number: NP95003427
NPI: 1063856805
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

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

C. Directorio de proveedores de atención primaria

Phone: (858) 279-0925
 Fax:
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

OCAMPO, ELAINE R

Provider ID: 482070
 Provider Gender: Female
 License number: NP95003427
 NPI: 1063856805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

ORPILLA, IMELDA M

Provider ID: 417101
 Provider Gender: Female
 License number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: W
 Hours: M-F 8AM-4:30PM, SA 9AM-5PM

ORPILLA, IMELDA M

Provider ID: 418535
 Provider Gender: Female
 License number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM

OWEN, MICHAEL C

Provider ID: 206362
 Provider Gender: Female
 License number: NP95001492
 NPI: 1073869145
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

PATEL, KELLY M

Provider ID: 402851
Provider Gender: Female
License number: NP95004735
NPI: 1033493747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

PATIAG, DANIEL B

Provider ID: 206046
Provider Gender: Male
License number: NP95012511
NPI: 1073169769
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

PATIAG, DANIEL B

Provider ID: 482070
Provider Gender: Male
License number: NP95012511
NPI: 1073169769
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

POLHEBER, AMELIA S

Provider ID: 233597
Provider Gender: Female
License number: NP95002509
NPI: 1780816082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-2PM

QUINTO, CINDY R

Provider ID: 233532
Provider Gender: Female
License number: NP16433
NPI: 1902810377
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax:
After Hours Phone: (619) 280-2058

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C. Directorio de proveedores de atención primaria

Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/22
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 8AM-2PM

QUINTO, CINDY R

Provider ID: 482070
 Provider Gender: Female
 License number: NP16433
 NPI: 1902810377
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Lao, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:

After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

RAMOS-HAGGAN, ANNETTE M

Provider ID: 207382
 Provider Gender: Female

License number: NP95002918
 NPI: 1285091991
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Board Certified Specialty: No
 IHP-SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
 Phone: (619) 234-0505
 Fax: (619) 234-2158
 After Hours Phone: (619) 234-0505
 Website: www.sdaihc.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

REID, EMILY

Provider ID: 185268
 Provider Gender: Female
 License number: NP95002766
 NPI: 1083081467
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email:

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

ROGERS, TANYA L

Provider ID: 206353
 Provider Gender: Female
 License number: NP95004443
 NPI: 1558710038
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

ROGERS, TANYA L

Provider ID: 417987
 Provider Gender: Female
 License number: NP95004443
 NPI: 1558710038
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:

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

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

RUTH, MARION A

Provider ID: 207382
Provider Gender: Female
License number: NP95006781
NPI: 1740789288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Website: www.sdaihc.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA

9AM-5PM

SABIN, NANCY J

Provider ID: 206046
Provider Gender: Female
License number: NP4668
NPI: 1285732586
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SABIN, NANCY J

Provider ID: 482070
Provider Gender: Female
License number: NP4668
NPI: 1285732586
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

SANTANGELO, JOANNE

Provider ID: 206046
Provider Gender: Female
License number: NP2390
NPI: 1619370475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SANTANGELO, JOANNE

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

C. Directorio de proveedores de atención primaria

Provider ID: 482070
Provider Gender: Female
License number: NP2390
NPI: 1619370475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

SATTERWHITE, MAURINE C
Provider ID: 206046
Provider Gender: Female
License number: NP7022
NPI: 1225012842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SATTERWHITE, MAURINE C
Provider ID: 482070
Provider Gender: Female
License number: NP7022
NPI: 1225012842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

SOTO, ROBIN J
Provider ID: 206360
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM

SOTO, ROBIN J
Provider ID: 356145
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2435

Fax:

After Hours Phone: (619)
515-2435

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

TAYLOR, KAYLA L

Provider ID: 206362

Provider Gender: Female

License number: NP95006792

NPI: 1730604414

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

TAYLOR, KAYLA L

Provider ID: 417429

Provider Gender: Female

License number: NP95006792

NPI: 1730604414

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY # 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax:

After Hours Phone: (619)

515-2525

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

TODD, MIKAYLA S

Provider ID: 517998

Provider Gender: Female

License number: NP95005999

NPI: 1316478092

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4690 EL CAJON BLVD

SAN DIEGO, CA 92115-4403

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

TRAN, KELLY T

Provider ID: 206360

Provider Gender: Female

License number: NP95003689

NPI: 1255799276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

TUEROS, VICTORIA S

Provider ID: 206360

Provider Gender: Female

License number: NP2286

NPI: 1598989261

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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

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

C. Directorio de proveedores de atención primaria

<i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM	<i>Hours:</i> M-SA 9AM-5PM VELASQUEZ, FERNANDO <i>Provider ID:</i> 356145 <i>Provider Gender:</i> Male <i>License number:</i> NP95011254 <i>NPI:</i> 1386195535 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 2391 ISLAND AVE SAN DIEGO, CA 92102-2941 <i>Phone:</i> (619) 515-2435 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2435 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113-1195 <i>Phone:</i> (619) 515-2422 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2422 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
VELASQUEZ, FERNANDO <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> NP95011254 <i>NPI:</i> 1386195535 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> ME	VELASQUEZ, FERNANDO <i>Provider ID:</i> 419529 <i>Provider Gender:</i> Male <i>License number:</i> NP95011254 <i>NPI:</i> 1386195535 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO	WALSH, DEBORAH A <i>Provider ID:</i> 417782 <i>Provider Gender:</i> Female <i>License number:</i> NP95003061 <i>NPI:</i> 1255574612 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2430 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2430 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM

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

C. Directorio de proveedores de atención primaria

WALSH, DEBORAH A <i>Provider ID:</i> 419167 <i>Provider Gender:</i> Female <i>License number:</i> NP95003061 <i>NPI:</i> 1255574612 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> IB, E, R <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	<i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	<i>License number:</i> NP95011458 <i>NPI:</i> 1154703718 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM
WEICKERT, MARIA T <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> NP95010814 <i>NPI:</i> 1841758984 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621	WEICKERT, MARIA T <i>Provider ID:</i> 417429 <i>Provider Gender:</i> Female <i>License number:</i> NP95010814 <i>NPI:</i> 1841758984 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2525 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2525 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	WESTON, TIFFANIE <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> NP95011458 <i>NPI:</i> 1154703718 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes
	WESTON, TIFFANIE <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female	

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

C. Directorio de proveedores de atención primaria

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

WILLIAMS, BREAHA A

Provider ID: 185268
 Provider Gender: Female
 License number: NP95001840
 NPI: 1063884864
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax:
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

WOLF, CELIA C

Provider ID: 417937
 Provider Gender: Female
 License number: NP95001899
 NPI: 1245635564
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:

After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

GEPSHTEIN, YANA

Provider ID: 402851
 Provider Gender: Female
 License number: NM1662
 NPI: 1396956512
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hebrew
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

CHIROPRACTOR

ASSADIAN, MEHRAK S

Provider ID: 451167
 Provider Gender: Female
 License number: DC27523
 NPI: 1295278281
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-F 8AM-5PM, SA 8AM-4PM

KAMSI, ALEX

Provider ID: 185268
 Provider Gender: Male
 License number: DC28966
 NPI: 1851405955
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No

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

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

KAZEM, AHMAD N
Provider ID: 227409
Provider Gender: Male
License number: DC33300
NPI: 1003296096
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
 9AM-5PM
KENNA, AARON A
Provider ID: 418535
Provider Gender: Male
License number: DC32051
NPI: 1457629495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:

After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

LOVERN, JENNIFER K
Provider ID: 418535
Provider Gender: Female
License number: DC29074
NPI: 1235469396
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Italian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
 200-2426
Website:
 www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

PAGE, BIANCA M
Provider ID: 417937
Provider Gender: Female
License number: DC33688
NPI: 1649787607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F

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

C. Directorio de proveedores de atención primaria

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

ROJAS, RICHARD J

Provider ID: 417937

Provider Gender: Male

License number: DC31024

NPI: 1538318811

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-TH 8AM-9PM, F

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

SOSA, DAVID S

Provider ID: 206363

Provider Gender: Male

License number: DC33150

NPI: 1013308675

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

TAGHIZADEH, MAJID

Provider ID: 417937

Provider Gender: Male

License number: DC30121

NPI: 1750590600

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Turkish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-TH 8AM-9PM, F

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

OPERATION SAMAHAN

RANCHO PENASQUITOS,

Provider ID: 418535

Provider Gender:

License number: 550002478

NPI: 1699216622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD

STE B10 AND B11

SAN DIEGO, CA 92129-2889

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM,

SA 9AM-5PM

OPERATION SAMAHAN

RANCHO PENASQUITOS,

Provider ID: 418535

Provider Gender:

License number: 550003857

NPI: 1699216622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD

STE B10 AND B11

CLINIC OUTPATIENT

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

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

C. Directorio de proveedores de atención primaria

SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM

DERMATOLOGY

BURROWS, WILLIAM M
Provider ID: 417937
Provider Gender: Male
License number: G16236
NPI: 1639199292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM
CARTER, NATASHA F
Provider ID: 206363
Provider Gender: Female
License number: A140912
NPI: 1033539184
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

ENDOCRINOLOGY METABOLISM DIABETES

AHMAD, AAKIF
Provider ID: 206360
Provider Gender: Male
License number: 20A12732
NPI: 1720308331
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Green Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARRILLO, MARITZA E
Provider ID: 206360
Provider Gender: Female
License number: A163183
NPI: 1649628587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

C. Directorio de proveedores de atención primaria

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

CHANG, AMY S

Provider ID: 206360
Provider Gender: Female
License number: A93385
NPI: 1750568911
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Saddleback Memorial Med Ctr, Scripps Green Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

HARRIS, SAMANTHA R

Provider ID: 206360
Provider Gender: Female
License number: A120043
NPI: 1720305436
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

HOSEIN, NADEEN

Provider ID: 417937
Provider Gender: Female
License number: A113255
NPI: 1912051715
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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

LEVINE, MATTHEW J

Provider ID: 206360
Provider Gender: Male
License number: A77126
NPI: 1801994231
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

LORENZO, PATRICIA C

Provider ID: 206360
Provider Gender: Female
License number: A129599
NPI: 1487913315
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps

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

C. Directorio de proveedores de atención primaria

Memorial Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MARX, CHRISTOPHER W
Provider ID: 206360
Provider Gender: Male
License number: G58195
NPI: 1811958929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
MCCALLUM, JAMES D
Provider ID: 206360
Provider Gender: Male
License number: A55708
NPI: 1609838994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

NAGELBERG, JODI B
Provider ID: 206360
Provider Gender: Female
License number: A146838
NPI: 1720474141
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

PHILIS-TSIMIKAS, ATHENA
Provider ID: 206360
Provider Gender: Female
License number: A50477
NPI: 1922105964
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Greek
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Green Hospital, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

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

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

REDDY, NAVYA M

Provider ID: 206360
Provider Gender: Female
License number: A151525
NPI: 1083069611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

RODRIGUEZ MARTINEZ, RENIL M

Provider ID: 206360
Provider Gender: Female
License number: A142703
NPI: 1477817757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

FAMILY PRACTICE

AHMAD, ROBINA

Provider ID: 569911
Provider Gender: Female
License number: A168887
NPI: 1003265745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM

AHMAD, ROBINA

Provider ID: 569912
Provider Gender: Female

License number: A168887
NPI: 1003265745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
Website:

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

AHN, EDWARD J

Provider ID: 96552
Provider Gender: Male
License number: A38304
NPI: 1093805103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
7750 DAGGET ST STE 108
SAN DIEGO, CA 92111-2235
Phone: (858) 571-1004
Fax: (858) 571-1006
After Hours Phone: (858)
571-1004
Website:
Email:

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

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

C. Directorio de proveedores de atención primaria

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

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409
Provider Gender: Male
License number: A157505
NPI: 1588197826
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ARRIETA, NOEMI J

Provider ID: 206360
Provider Gender: Female
License number: 20A11153
NPI: 1912223496
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ASTRAN, MELINDA

Provider ID: 451167
Provider Gender: Female
License number: C163169
NPI: 1184624744
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

BACHARACH, REBECCA E

Provider ID: 417937
Provider Gender: Female
License number: 20A15459
NPI: 1225442643
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 206360
Provider Gender: Male
License number: A163977
NPI: 1942705637
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

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

C. Directorio de proveedores de atención primaria

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 417429
Provider Gender: Male
License number: A163977
NPI: 1942705637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

BAGINGITO, AUSTIN G

Provider ID: 417937

Provider Gender: Male
License number: A163977
NPI: 1942705637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

BAHRAMZI, MARIA

Provider ID: 206362
Provider Gender: Female
License number: A173486
NPI: 1588141865
Provider English Spoken: Yes
Provider Language(s) Spoken:
Pushto
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424

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

BAHRAMZI, MARIA

Provider ID: 417987
Provider Gender: Female
License number: A173486
NPI: 1588141865
Provider English Spoken: Yes
Provider Language(s) Spoken:
Pushto
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619)
515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

BAUTISTA, LUIS G

Provider ID: 517403
Provider Gender: Male
License number: A97270
NPI: 1295712206
Provider English Spoken: Yes

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

C. Directorio de proveedores de atención primaria

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Fresno

Community Hospital, St Agnes
Medical Center

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

316 25TH ST

SAN DIEGO, CA 92102-3016

Phone: (619) 238-5551

Fax:

After Hours Phone: (619)

238-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

BORTNER, ADAM C

Provider ID: 206363

Provider Gender: Male

License number: A164879

NPI: 1811491749

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

BORTNER, ADAM C

Provider ID: 417937

Provider Gender: Male

License number: A164879

NPI: 1811491749

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-TH 8AM-9PM, F

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

BRADY, PATRICIA H

Provider ID: 403583

Provider Gender: Female

License number: C53121

NPI: 1952390437

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

BRODSKY, MARK E

Provider ID: 402851

Provider Gender: Male

License number: C53623

NPI: 1346337904

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

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

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

C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

BROWNELL, KRISTIN J

Provider ID: 206353
Provider Gender: Female
License number: A80154
NPI: 1134232259
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax: (619) 795-2756
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

BROWN, BRANDON S

Provider ID: 206360
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

CAMPOS, PRISCILLA J

Provider ID: 206360
Provider Gender: Female
License number: A152651
NPI: 1508217399
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME

Hours: M-SA 9AM-5PM

CARRIEDO CENICEROS, MARIA T

Provider ID: 227409
Provider Gender: Female
License number: A78373
NPI: 1295746618
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100

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

CARSON, COREY M

Provider ID: 206353
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

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

C. Directorio de proveedores de atención primaria

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CARSON, COREY M

Provider ID: 206360
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

CARSON, COREY M

Provider ID: 417937
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License number: 20A14794
NPI: 1730448101
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CHOU, BILL

Provider ID: 417937
Provider Gender: Male
License number: 20A14794
NPI: 1730448101
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

CHUN, HYUN B

Provider ID: 206360
Provider Gender: Male

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

C. Directorio de proveedores de atención primaria

License number: A163978
NPI: 1083118988
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

COLLINS, WILLIAM M
Provider ID: 206362
Provider Gender: Male
License number: 20A15413
NPI: 1417361973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424

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

COLLINS, WILLIAM M
Provider ID: 417937
Provider Gender: Male
License number: 20A15413
NPI: 1417361973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

CORMAN, DANIEL M
Provider ID: 206353
Provider Gender: Male
License number: 20A13060
NPI: 1629339593

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CORMAN, DANIEL M
Provider ID: 402851
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email:

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

COULSON, LAURA E

Provider ID: 206353
Provider Gender: Female
License number: A76301
NPI: 1447308424
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

DAMASCO GUTIERREZ, DAISY C

Provider ID: 418535
Provider Gender: Female
License number: A66993
NPI: 1700841582
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM

DANGREMOND, ADRIANNA J

Provider ID: 206360
Provider Gender: Female
License number: G138260
NPI: 1508802828
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

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

DAPPEN, AMANDA K

Provider ID: 227409
Provider Gender: Female
License number: A153414
NPI: 1689037111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

DAVIS, DEIRDRE S

Provider ID: 451167
Provider Gender: Female
License number: A165432
NPI: 1265921365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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

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

C. Directorio de proveedores de atención primaria

Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

DWABE, KEFAH T
Provider ID: 108795
Provider Gender: Male
License number: A94193
NPI: 1477656049
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Burmese, Cambodian, Thai
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 4863 EL CAJON BLVD # A
 SAN DIEGO, CA 92115-4636
Phone: (619) 286-9000
Fax: (619) 286-9004
After Hours Phone: (619) 286-9000
Website:
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

FAMBRO, CYNTHIA L
Provider ID: 451167
Provider Gender: Female
License number: A153223
NPI: 1710331707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

GLEASON ROHRER, GWEN E
Provider ID: 233532
Provider Gender: Female
License number: A112176
NPI: 1710140462
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax:
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 8AM-2PM

GLEASON ROHRER, GWEN E
Provider ID: 233597
Provider Gender: Female
License number: A112176
NPI: 1710140462
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA

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

C. Directorio de proveedores de atención primaria

8AM-2PM

GREEN, BRENDA

Provider ID: 206353
Provider Gender: Female
License number: A134406
NPI: 1508125410
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

GRIFFITHS, KENNETH J

Provider ID: 417937
Provider Gender: Male
License number: C52451
NPI: 1760563068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE

SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

HAMILTON, LISA MARIE S

Provider ID: 206363
Provider Gender: Female
License number: 20A14772
NPI: 1235576059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

HAMILTON, LISA MARIE S

Provider ID: 418142

Provider Gender: Female
License number: 20A14772
NPI: 1235576059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

HASSANEIN, TAREK I

Provider ID: 414056
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont

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

C. Directorio de proveedores de atención primaria

Hospital, Alvarado Hospital Llc,
Hoag Hospital Irvine
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
995 GATEWAY CENTER WAY
STE 105
SAN DIEGO, CA 92102-4544
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619)
264-1934
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

HEINRICI, ALEKA D

Provider ID: 451167
Provider Gender: Female
License number: A125329
NPI: 1780979120
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: John Muir
Medical Center Walnut Creek
Campus
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8AM-5PM, SA
8AM-4PM

HOLTZMAN, AURY L

Provider ID: 417101
Provider Gender: Male
License number: A43970
NPI: 1548462567
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
OPERATION SAMAHAN
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426

Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-4:30PM, SA
9AM-5PM

HOLTZMAN, AURY L

Provider ID: 418535
Provider Gender: Male
License number: A43970
NPI: 1548462567
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM,
SA 9AM-5PM

KAUFHOLD, ANNE D

Provider ID: 227409
Provider Gender: Female
License number: A88893
NPI: 1164508073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax: (619) 858-1003
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

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

KAUFMAN, JENNIFER CHILYN

L

Provider ID: 206353
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

KAUFMAN, JENNIFER CHILYN

L

Provider ID: 417987
Provider Gender: Female
License number: G149974
NPI: 1407818768
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KEFLEZIGHI, BAHGHI R

Provider ID: 206363
Provider Gender: Female
License number: A100391
NPI: 1124210844
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:

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

KIDDER, BRENDAN J

Provider ID: 227409
Provider Gender: Male
License number: A112379
NPI: 1275793929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

KIM, ERNEST S

Provider ID: 417429
Provider Gender: Male
License number: A156221
NPI: 1124414925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

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

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

KIM, ERNEST S

Provider ID: 417937
Provider Gender: Male
License number: A156221
NPI: 1124414925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F

8AM-5PM, SA 9AM-5PM
KUNDU, SURITI
Provider ID: 206353
Provider Gender: Female
License number: G80882
NPI: 1326132754
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LEE, SANDRINE J

Provider ID: 206362
Provider Gender: Female
License number: 20A15068
NPI: 1073909651
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LE, TRAM B, MD

Provider ID: 44947
Provider Gender: Female
License number: A105829
NPI: 1346442985
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 5507 EL CAJON BLVD # L
 SAN DIEGO, CA 92115-3624
Phone: (619) 286-2789
Fax: (619) 265-2070
After Hours Phone: (619) 286-2789
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

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

C. Directorio de proveedores de atención primaria

LINDEMAN, KURTIS P <i>Provider ID:</i> 403583 <i>Provider Gender:</i> Male <i>License number:</i> A104052 <i>NPI:</i> 1124155791 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Board Certified Specialty:</i> No IHP-ST VINCENT DE PAUL VILLA 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 <i>Phone:</i> (619) 233-8500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 233-8500 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 9AM-5PM	SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	MANDOYAN, AUSTIN <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A161682 <i>NPI:</i> 1841726148 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM
LIU, JIE <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> A147758 <i>NPI:</i> 1780066472 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF	LU, JULIE P <i>Provider ID:</i> 418142 <i>Provider Gender:</i> Female <i>License number:</i> 20A14804 <i>NPI:</i> 1619210614 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 <i>Phone:</i> (619) 515-2454 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2454 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	MARSTON, JACQUELINE N <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> 20A12402 <i>NPI:</i> 1417205055 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342

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

C. Directorio de proveedores de atención primaria

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

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

MARSTON, JACQUELINE N

Provider ID: 482070

Provider Gender: Female

License number: 20A12402

NPI: 1417205055

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

MATICH, BRANKO

Provider ID: 206046

Provider Gender: Male

License number: C174985

NPI: 1023437704

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

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

MATICH, BRANKO

Provider ID: 482070

Provider Gender: Male

License number: C174985

NPI: 1023437704

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

MELGAR, MONICA L

Provider ID: 402851

Provider Gender: Female

License number: A154399

NPI: 1629432174

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

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

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

C. Directorio de proveedores de atención primaria

MORALES, ALEJANDRA

Provider ID: 227409
Provider Gender: Female
License number: A162332
NPI: 1063945657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihipsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

NATERAS-ARREOLA, AICHEL

Provider ID: 206360
Provider Gender: Female
License number: A151610
NPI: 1093197543
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

NGUYEN CLEARY, THAI C

Provider ID: 417937
Provider Gender: Male
License number: A86079
NPI: 1467442624
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Hollywood Presbyterian Med Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

NIAZI, HARRIS O

Provider ID: 206360

Provider Gender: Male
License number: A146111
NPI: 1174905871
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

NIKZAD, JASON

Provider ID: 206360
Provider Gender: Male
License number: 20A12653
NPI: 1508121674
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

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

C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

NORRIS, JEFFREY M

Provider ID: 403583

Provider Gender: Male

License number: A136275

NPI: 1073870374

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)
233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

NUQUI, JOSIE C

Provider ID: 432308

Provider Gender: Female

License number: A71544

NPI: 1184773673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

OPERATION SAMAHAN

9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

NUQUI, JOSIE C , MD

Provider ID: 448997

Provider Gender: Female

License number: A71544

NPI: 1184773673

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9855 ERMA RD STE 105

SAN DIEGO, CA 92131-1007

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

ORTIZ, KENNETH K

Provider ID: 517403

Provider Gender: Male

License number: A156607

NPI: 1356761571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

316 25TH ST

SAN DIEGO, CA 92102-3016

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

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

PALOMINO, VERONICA N

Provider ID: 206353

Provider Gender: Female

License number: A121451

NPI: 1255569083

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

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

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

C. Directorio de proveedores de atención primaria

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

PALOMINO, VERONICA N

Provider ID: 206360
Provider Gender: Female
License number: A121451
NPI: 1255569083
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

PALOMINO, VERONICA N

Provider ID: 419529
Provider Gender: Female
License number: A121451
NPI: 1255569083
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: (619) 515-2422
Fax:
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM

PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License number: 20A14012
NPI: 1336484104
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY # 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

PEREZ, PERLITA A

Provider ID: 206363
Provider Gender: Female
License number: A119689
NPI: 1174810972
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

PROPST, TOBE M

Provider ID: 403583

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

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A82123
NPI: 1194814277
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500

Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

RAHMAN, AKBAR A

Provider ID: 403583
Provider Gender: Male
License number: A110134
NPI: 1720314933
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
 Board Certified Specialty: No
 IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

RAMIREZ, CRISTHIAN E

Provider ID: 206360
Provider Gender: Female
License number: 20A17478
NPI: 1407200942
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

RAWI, BASHIR A , MD

Provider ID: 407212
Provider Gender: Male

License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 955 GATEWAY CENTER WAY # 105
 SAN DIEGO, CA 92102-4542
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619) 264-1934
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

RAWI, BASHIR A

Provider ID: 407212
Provider Gender: Male
License number: A48140
NPI: 1003964834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

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

C. Directorio de proveedores de atención primaria

955 GATEWAY CENTER WAY #
105

SAN DIEGO, CA 92102-4542

Phone: (619) 264-1934

Fax: (619) 264-1937

After Hours Phone: (619)

264-1934

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

RECALDE, FRANCISCO J , MD

Provider ID: 13850

Provider Gender: Male

License number: C41872

NPI: 1538309067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3811 EL CAJON BLVD

SAN DIEGO, CA 92105-1020

Phone: (619) 284-5622

Fax: (619) 283-2572

After Hours Phone: (619)

507-3050

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

RICHARDSON, DANIELLE M

Provider ID: 214492

Provider Gender: Female

License number: A127555

NPI: 1609142892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: Yes

IHP-IMPERIAL BEACH HEALTH

CENTER

1016 OUTER RD

SAN DIEGO, CA 92154-1351

Phone: (619) 429-3733

Fax:

After Hours Phone: (619)

429-3733

Website: www.ibclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, IB, E, R, T, W

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

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

RITTER, STEVEN F

Provider ID: 451167

Provider Gender: Male

License number: 20A7435

NPI: 1356556021

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, W

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

8AM-4PM

RIVO, JULIE C

Provider ID: 206360

Provider Gender: Female

License number: A163562

NPI: 1689178949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ, SEAN J

Provider ID: 227409

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

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

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: A120576
NPI: 1780909903
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ROJAS, SARAH A

Provider ID: 417937
Provider Gender: Female
License number: A139169
NPI: 1245645076
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

ROJAS, STEVEN M

Provider ID: 227409
Provider Gender: Male
License number: A132982
NPI: 1801230297
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: (619) 662-4100

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

SAROKI, KAREN A

Provider ID: 97801

Provider Gender: Female
License number: A105032
NPI: 1215157284
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5030 CAMINO DE LA SIESTA
STE 106
SAN DIEGO, CA 92108-3117
Phone: (619) 692-4401
Fax: (619) 692-8147
After Hours Phone: (619) 692-4401
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM

SCOTT, LAGINA R

Provider ID: 206360
Provider Gender: Female
License number: A160489
NPI: 1558897009
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License number: A162946

NPI: 1457887911

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

SEARLES, ROBERT C

Provider ID: 403583

Provider Gender: Male

License number: A79566

NPI: 1891807764

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)
233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

SHEIKH, ZARA S

Provider ID: 233532

Provider Gender: Female

License number: A163512

NPI: 1952808727

Provider English Spoken: Yes

Provider Language(s) Spoken:
Urdu

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2058

Fax:

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, W

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

SHEIKH, ZARA S

Provider ID: 233597

Provider Gender: Female

License number: A163512

NPI: 1952808727

Provider English Spoken: Yes

Provider Language(s) Spoken:
Urdu

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax:

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

SHIHATA, ALFRED A

Provider ID: 37502

Provider Gender: Male

License number: A37090

NPI: 1841225810

Provider English Spoken: Yes

Provider Language(s) Spoken:

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

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

C. Directorio de proveedores de atención primaria

Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Chula Vista Med Ctr
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 3802 NATIONAL AVE
 SAN DIEGO, CA 92113-3223
Phone: (619) 264-2591
Fax: (619) 264-4116
After Hours Phone: (619)
 264-2591
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

SHIRAKI, JEAN M

Provider ID: 206353
Provider Gender: Female
License number: 20A17577
NPI: 1144684382
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

SHIRAKI, JEAN M

Provider ID: 417987
Provider Gender: Female
License number: 20A17577
NPI: 1144684382
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:

After Hours Phone: (619)
 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SHUMILAK, KAILI J

Provider ID: 418142
Provider Gender: Female
License number: 20A12796
NPI: 1831489855
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619)
 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

SIDRICK, NADINE E

Provider ID: 367851
Provider Gender: Female
License number: G42131
NPI: 1134140718
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 4440 EUCLID AVE # C
 SAN DIEGO, CA 92115-4522
Phone: (619) 582-5105
Fax: (619) 582-5121
After Hours Phone: (619)
 582-5105
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

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

C. Directorio de proveedores de atención primaria

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM SMOOT, CHARLES B <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> A97036 <i>NPI:</i> 1245490358 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM SMOOT, CHARLES B <i>Provider ID:</i> 356145 <i>Provider Gender:</i> Male <i>License number:</i> A97036 <i>NPI:</i> 1245490358 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 2391 ISLAND AVE	SAN DIEGO, CA 92102-2941 <i>Phone:</i> (619) 515-2435 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2435 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM SNYDER, CHRISTOPHER L <i>Provider ID:</i> 517998 <i>Provider Gender:</i> Male <i>License number:</i> 20A7502 <i>NPI:</i> 1922041235 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pih Hospital - Downey, John F Kennedy Memorial Hosp, Cedars Sinai Medical Center, Scripps Memorial Hospital Encinitas, Eisenhower Medical Ctr, Grossmont Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 4690 EL CAJON BLVD SAN DIEGO, CA 92115-4403 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/120 <i>American Sign Language (ASL):</i>	No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM SUH, YOUNG S <i>Provider ID:</i> 207382 <i>Provider Gender:</i> Male <i>License number:</i> C55546 <i>NPI:</i> 1710239223 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 <i>Phone:</i> (619) 234-2158 <i>Fax:</i> <i>After Hours Phone:</i> (619) 234-2158 <i>Website:</i> www.sdaihc.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM SUMMERS-DAY, COURTNEY A <i>Provider ID:</i> 214492 <i>Provider Gender:</i> Female <i>License number:</i> A112781 <i>NPI:</i> 1124288873 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

IHP-IMPERIAL BEACH HEALTH CENTER
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax:
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, IB, E, R, T, W
Hours: M,F 8:30AM-5PM, TU-TH 8:30AM-8PM, SA 9AM-5PM

SWARTZ, JOHN R
Provider ID: 403583
Provider Gender: Male
License number: G72486
NPI: 1396754131
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 9AM-5PM
THOMAS, ZACHARY S
Provider ID: 206353
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

THOMAS, ZACHARY S
Provider ID: 417987
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE

SAN DIEGO, CA 92105-2026
Phone: (619) 515-2426
Fax:
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

TRAN, TONNIA T
Provider ID: 233597
Provider Gender: Female
License number: 20A7662
NPI: 1982746657
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-2PM

TRAN, TU PHUONG T
Provider ID: 206353

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

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A152730
NPI: 1093179921
Provider English Spoken: Yes
Provider Language(s) Spoken: Sign Language, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

TRAN, UYEN THAO P

Provider ID: 206353
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

TRAN, UYEN THAO P

Provider ID: 206360
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 Accessibility: ME
Hours: M-SA 9AM-5PM

VALENZUELA, TRICIA E

Provider ID: 206363
Provider Gender: Female
License number: A161373
NPI: 1346776358
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

VILLA, MARIA T , MD

Provider ID: 107710
Provider Gender: Female
License number: A86224
NPI: 1861541385
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 SATURN BLVD STE J
 SAN DIEGO, CA 92154-4734

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

C. Directorio de proveedores de atención primaria

Phone: (619) 646-7975
Fax: (619) 575-1297
After Hours Phone: (619) 646-7975

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, T, W

Hours: M-SA 9AM-5PM

WANG, KEVIN

Provider ID: 206362

Provider Gender: Male

License number: A158708

NPI: 1932635281

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

WANG, REGINA M

Provider ID: 403583

Provider Gender: Female

License number: A109828

NPI: 1154554871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Long Beach

Memorial Med Ctr, Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

WHITE, KATHERINE N

Provider ID: 227409

Provider Gender: Female

License number: A120447

NPI: 1801112925

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113-1432

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

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

9AM-5PM

WU, JENNIFER J

Provider ID: 403583

Provider Gender: Female

License number: A54702

NPI: 1215953013

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Board Certified Specialty: No

IHP-ST VINCENT DE PAUL

VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

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

9AM-5PM

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

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

C. Directorio de proveedores de atención primaria

ZAHLER, MARVIN W <i>Provider ID:</i> 417937 <i>Provider Gender:</i> Male <i>License number:</i> 20A11612 <i>NPI:</i> 1134380710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2545 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2545 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	<i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC, <i>Provider ID:</i> 206363 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1982747671 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> (619) 263-2499 <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM
ZINK, IRENE M <i>Provider ID:</i> 227409 <i>Provider Gender:</i> Female <i>License number:</i> C54198 <i>NPI:</i> 1215959549 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432	CITY HEIGHTS FAMILY HEALTH CENTERS INC, <i>Provider ID:</i> 206353 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1023054004 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> (619) 546-9800 <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	DOWNTOWN FAMILY CTR AT CONNECTIONS, <i>Provider ID:</i> 417782 <i>Provider Gender:</i> <i>License number:</i> 550002251 <i>NPI:</i> 1588901045 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2430
Fax: (619) 578-2410
After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

Provider Gender:

License number: 550003108

NPI: 1477953933

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T

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

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

Provider Gender:

License number: 550002061

NPI: 1316419070

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax: (619) 231-0431

After Hours Phone: (619) 515-2520

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: IB, E, R

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

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 418142

Provider Gender:

License number: 550003556

NPI: 1336525906

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF SAN DIEGO

5160 FEDERAL BLVD

SAN DIEGO, CA 92105-5429

Phone: (619) 515-2454

Fax: (619) 794-2696

After Hours Phone: (619) 515-2454

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

Provider Gender:

License number: 550003113

NPI: 1235521782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF SAN DIEGO

2325 COMMERCIAL ST STE

1400

SAN DIEGO, CA 92113-1195

Phone: (619) 515-2422

Fax: (619) 269-0053

After Hours Phone: (619) 515-2422

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429

Provider Gender:

License number: 550002865

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

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

C. Directorio de proveedores de atención primaria

NPI: 1952729303
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2525
 Fax: (619) 501-5814
 After Hours Phone: (619)
 515-2525
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

**FAMILY HLTH CTR SAN
 DIEGO-BEACH AREA,**
 Provider ID: 402851
 Provider Gender:
 License number: 080000115
 NPI: 1386689701
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax: (858) 488-1394
 After Hours Phone: (619)
 515-2444
 Website: www.fhcsd.org
 Email:

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-W, F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

**FAMILY HLTH CTR SD
 HILLCREST,**
 Provider ID: 417937
 Provider Gender:
 License number: 550003099
 NPI: 1629456900
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax: (619) 501-9645
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

**KING CHAVEZ HEALTH
 CENTER,**
 Provider ID: 451167
 Provider Gender:
 License number:
 NPI: 1538262092
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH
 CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax: (619) 662-4158
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-F 8AM-5PM, SA
 8AM-4PM

**LA MAESTRA FAMILY CLINIC
 INC,**
 Provider ID: 185268
 Provider Gender:
 License number:
 NPI: 1336353721
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty:
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9155
 Fax: (619) 795-9849
 After Hours Phone: (619)
 255-9155
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

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

C. Directorio de proveedores de atención primaria

No ☞ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> (858) 633-4680 <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	MID-CITY COMMUNITY CLINIC, <i>Provider ID:</i> 233532 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1962483040 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN DIEGO FAMILY CARE 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2058 <i>Fax:</i> (858) 633-4682 <i>After Hours Phone:</i> (619) 280-2058 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/22 <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM
LINDA VISTA HEALTH CARE CTR, <i>Provider ID:</i> 206046 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1609905215 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> (858) 633-4680 <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	LOGAN HEIGHTS FAMILY HEALTH CENTER, <i>Provider ID:</i> 206360 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1447281936 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> (619) 234-2447 <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM	MID-CITY COMMUNITY CLINIC, <i>Provider ID:</i> 233597 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1962483040 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524
LINDA VISTA HEALTH CARE CTR, <i>Provider ID:</i> 206046 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1780665877 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i>		

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

C. Directorio de proveedores de atención primaria

Phone: (619) 563-0250
 Fax: (858) 633-4681
 After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 8AM-2PM

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492
 Provider Gender:
 License number: 550001474
 NPI: 1215246996
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: IHP-IMPERIAL BEACH HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733
 Website: www.ibclinic.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, IB, E, R, T, W
 Hours: M,F 8:30AM-5PM, TU-TH 8:30AM-8PM, SA 9AM-5PM

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
 Provider Gender:
 License number:
 NPI: 1700821303
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 501-0627
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831
 Provider Gender:
 License number: 090000469
 NPI: 1700821303
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 683-7586
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 417101
 Provider Gender:
 License number: 080000146
 NPI: 1871680397
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-4:30PM, SA 9AM-5PM

OPERATION SAMAHAN - MIRA

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

C. Directorio de proveedores de atención primaria

MESA, <i>Provider ID:</i> 432308 <i>Provider Gender:</i> <i>License number:</i> 080000146 <i>NPI:</i> 1861933897 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> OPERATION SAMAHAN 9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 536-8034 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 695-9074 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM	SA 9AM-5PM
OPERATION SAMAHAN RANCHO PENASQUITOS, <i>Provider ID:</i> 418535 <i>Provider Gender:</i> <i>License number:</i> 550002478 <i>NPI:</i> 1699216622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> OPERATION SAMAHAN 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889	OPERATION SAMAHAN RANCHO PENASQUITOS, <i>Provider ID:</i> 418535 <i>Provider Gender:</i> <i>License number:</i> 550003857 <i>NPI:</i> 1699216622 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> OPERATION SAMAHAN 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 695-9074 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM,	SAN DIEGO AMERICAN INDIAN HEALTH CENTER, <i>Provider ID:</i> 207382 <i>Provider Gender:</i> <i>License number:</i> 090000168 <i>NPI:</i> 1003902917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 <i>Phone:</i> (619) 234-2158 <i>Fax:</i> (619) 234-0505 <i>After Hours Phone:</i> (619) 234-2158 <i>Website:</i> www.sdaihc.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM SAN DIEGO FAMILY CARE, <i>Provider ID:</i> 482070 <i>Provider Gender:</i> <i>License number:</i> <i>NPI:</i> 1457724858 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307

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

C. Directorio de proveedores de atención primaria

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403

Provider Gender:

License number:

NPI: 1598308926

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

316 25TH ST

SAN DIEGO, CA 92102-3016

Phone: (619) 238-5551

Fax: (619) 238-3807

After Hours Phone: (619)
238-5551

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

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

SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409

Provider Gender:

License number:

NPI: 1326225632

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

3177 OCEAN VIEW BLVD

SAN DIEGO, CA 92113-1432

Phone: (619) 662-4100

Fax: (619) 595-0258

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

Provider ID: 517998

Provider Gender:

License number: 550003882

NPI: 1205477841

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH
CENTER

4690 EL CAJON BLVD

SAN DIEGO, CA 92115-4403

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,

Provider ID: 356145

Provider Gender:

License number:

NPI: 1174549232

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2391 ISLAND AVE

SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435

Fax: (619) 515-2435

After Hours Phone: (619)
515-2435

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH

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

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

C. Directorio de proveedores de atención primaria

CENTER,

Provider ID: 403583
Provider Gender:
License number: 090000297
NPI: 1598122871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-ST VINCENT DE PAUL
 VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
 9AM-5PM

GASTROENTEROLOGY

CHANDRADAS, SAJIV H

Provider ID: 417937
Provider Gender: Male
License number: A122474
NPI: 1720350465
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Scripps Mercy
 Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

CUMMINS, ANDREW B

Provider ID: 417937
Provider Gender: Male
License number: A102764
NPI: 1699917096
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital Encinitas
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*

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

DUBOIS, SUJA D

Provider ID: 417937
Provider Gender: Female
License number: A86651
NPI: 1013976612
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

FRENETTE, CATHERINE T

Provider ID: 417937
Provider Gender: Female
License number: A80461
NPI: 1417935081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital, Scripps

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

C. Directorio de proveedores de atención primaria

Mercy Hospital Chula Vista,
California Pacific Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

GADDIPATI, KISHORE V

Provider ID: 417937
Provider Gender: Male
License number: A111638
NPI: 1720114093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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

STIPHO, SALLY

Provider ID: 417937
Provider Gender: Female
License number: A104647
NPI: 1467642215
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Kindred Hospital San
Diego, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

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

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 100677
Provider Gender: Male
License number: A38907
NPI: 1952312621

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
3490 PALM AVE
SAN DIEGO, CA 92154-1664
Phone: (619) 423-5616
Fax: (619) 423-5686
After Hours Phone: (619)
423-5616
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM

DOAN STEPHENS, CRYSTAL T

Provider ID: 233532
Provider Gender: Female
License number: A152267
NPI: 1730570144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax:
After Hours Phone: (619)
280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

Min/Max Age: 0/22

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, W

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

DWABE, KEFAH T, MD

Provider ID: 108795

Provider Gender: Male

License number: A94193

NPI: 1477656049

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Burmese, Cambodian,
Thai

Cultural Competency: No

Hospital Affiliation: Alvarado
Hosp Med Ctr

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4863 EL CAJON BLVD # A
SAN DIEGO, CA 92115-4636

Phone: (619) 286-9000

Fax: (619) 286-9004

After Hours Phone: (619)
286-9000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

RECALDE, FRANCISCO J

Provider ID: 13850

Provider Gender: Male

License number: C41872

NPI: 1538309067

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy No

Hospital

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

3811 EL CAJON BLVD

SAN DIEGO, CA 92105-1020

Phone: (619) 284-5622

Fax: (619) 283-2572

After Hours Phone: (619)

507-3050

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

SIDRICK, NADINE E

Provider ID: 517998

Provider Gender: Female

License number: G42131

NPI: 1134140718

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4690 EL CAJON BLVD

SAN DIEGO, CA 92115-4403

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

VO, DUC D

Provider ID: 81143

Provider Gender: Male

License number: A43289

NPI: 1427096627

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Rady Childrens

Hospital San Diego, Scripps

Mercy Hospital Chula Vista

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

2418 ULRIC ST

SAN DIEGO, CA 92111-6040

Phone: (858) 560-1226

Fax: (858) 560-1205

After Hours Phone: (858)
560-1226

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

HEPATOLOGY

GISH, ROBERT G

Provider ID: 185268

Provider Gender: Male

License number: G45632

NPI: 1548281322

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch, French, Spanish,

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

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

C. Directorio de proveedores de atención primaria

Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Providence Santa Rosa Memorial Hospital, Ucsd Medical Ctr, Stanford Health Care, California Pacific Med Ctr, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Loma Linda University Comm Med Ctr, Regional Medical Ctr Of San Jose <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 <i>Phone:</i> (619) 255-9155 <i>Fax:</i> <i>After Hours Phone:</i> (619) 255-9155 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2545 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2545 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	<i>Hours:</i> M-SA 9AM-5PM INTERNAL MEDICINE
INFECTIOUS DISEASE	INTERNAL MEDICINE GERIATRIC MEDICINE	ALASSIL, SALLY <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A122238 <i>NPI:</i> 1982044483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM
LEWINSKI, MARY K <i>Provider ID:</i> 417937 <i>Provider Gender:</i> Female <i>License number:</i> A109633 <i>NPI:</i> 1659535094 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF	MBA, MBA UZOMA U <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> A155048 <i>NPI:</i> 1659720647 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME	ALASSIL, SALLY <i>Provider ID:</i> 419529 <i>Provider Gender:</i> Female <i>License number:</i> A122238 <i>NPI:</i> 1982044483 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO

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C. Directorio de proveedores de atención primaria

2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
Phone: (619) 515-2422

Fax:

After Hours Phone: (619)
515-2422

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

ALDOUS, JEANNETTE L

Provider ID: 451167

Provider Gender: Female

License number: A101017

NPI: 1073650339

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd
Medical Ctr, Pomerado Hospital,
Palomar Medical Center

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8AM-5PM, SA
8AM-4PM

AMATYA, SUBHA L

Provider ID: 417429

Provider Gender: Female

License number: A150777

NPI: 1861837221

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY # 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax:

After Hours Phone: (619)

515-2525

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

ANDERSON, KENDELL R

Provider ID: 417937

Provider Gender: Female

License number: 20A15598

NPI: 1285028191

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

ANDREWS, JOHN S

Provider ID: 403583

Provider Gender: Male

License number: G71080

NPI: 1003164302

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)

233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

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

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

C. Directorio de proveedores de atención primaria

BOHR, CHRISTINA T Provider ID: 417937 Provider Gender: Female License number: 20A17702 NPI: 1841794344 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcscd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcscd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	Provider ID: 417937 Provider Gender: Male License number: G80316 NPI: 1306808464 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcscd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
CHEN, JAMES Y Provider ID: 417937 Provider Gender: Male License number: A86644 NPI: 1265495691 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143	CSAPOCZI, PETER Provider ID: 451167 Provider Gender: Male License number: A96919 NPI: 1841357118 Provider English Spoken: Yes Provider Language(s) Spoken: Hungarian, Spanish, Ukrainian Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA 8AM-4PM	DODGE, JOHN M Provider ID: 417937 Provider Gender: Male License number: G67831 NPI: 1770510489 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143
DAHMS, ERIC B		

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:

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

FABELLA, GABRIEL T , MD

Provider ID: 9774
Provider Gender: Male
License number: A48087
NPI: 1124060827
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126-2361
Phone: (858) 695-1262
Fax: (858) 695-2132
After Hours Phone: (858) 695-1262
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-SA 9AM-5PM

FARASAT, SADAF

Provider ID: 206360
Provider Gender: Female
License number: A147939

NPI: 1255696407
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr, Natividad Medical Center
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

FEDER, GLEN A

Provider ID: 417937
Provider Gender: Male
License number: 20A17926
NPI: 1518461110
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

GEHR, MARC K

Provider ID: 417937
Provider Gender: Male
License number: G67338
NPI: 1306800180
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

GUTIERREZ, ANGELICA M

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

C. Directorio de proveedores de atención primaria

Provider ID: 233597
Provider Gender: Female
License number: A175116
NPI: 1982180329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:

After Hours Phone: (619)
 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 8AM-2PM

HAMMETT, ERIN K

Provider ID: 206363
Provider Gender: Female
License number: 20A14025
NPI: 1467884098
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Santa Barbara Cottage
 Hosp, Goleta Valley Cottage
 Hosp
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

HAN, PAUL J

Provider ID: 417937
Provider Gender: Male
License number: A116816
NPI: 1053553339
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

HAZELBAKER, PAUL N

Provider ID: 417782
Provider Gender: Male
License number: 20A7147
NPI: 1831106103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2430
Fax:
After Hours Phone: (619)
 515-2430
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8AM-5PM, SA
 9AM-5PM

HENDERSON, PHILIP L

Provider ID: 417937
Provider Gender: Male
License number: A140324
NPI: 1447678834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

HIGGINSON, MICHELLE C

Provider ID: 417937

Provider Gender: Female

License number: A74420

NPI: 1114955879

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

JACKSON, GAVIN N

Provider ID: 417937

Provider Gender: Male

License number: A110647

NPI: 1609033182

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

KARCHES, KELLI C

Provider ID: 417937

Provider Gender: Female

License number: A80931

NPI: 1891997631

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Ucsd La Jolla John
Sally Thornton, Ucsd Medical Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

KRIJGER, LISA C

Provider ID: 403583

Provider Gender: Female

License number: A67762

NPI: 1932278710

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-ST VINCENT DE PAUL
VILLA

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)
233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

LALITHAKUMARI, ARYA

Provider ID: 206362

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

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

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A140646
NPI: 1265874010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LAMANTIA, MICHELE A

Provider ID: 451167
Provider Gender: Female
License number: G71855
NPI: 1124176102
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: (619) 428-4463
Fax:
After Hours Phone: (619) 428-4463
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

LEE, MICHAEL W

Provider ID: 206360
Provider Gender: Male
License number: A71671
NPI: 1760406649
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Green Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

LE, CHARLES N , MD

Provider ID: 272919
Provider Gender: Male
License number: A124891
NPI: 1821243759
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Paradise Valley Hospital, Vibra Hospital Of San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4440 EUCLID AVE # A
 SAN DIEGO, CA 92115-4522
Phone: (619) 521-6812
Fax: (619) 521-6802
After Hours Phone: (619) 521-6812
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

MARCINIAK, ROMAN J

Provider ID: 206360
Provider Gender: Male
License number: 20A17072
NPI: 1326579210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

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

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

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

MARQUARDT, DIANA L

Provider ID: 233597

Provider Gender: Female

License number: G44220

NPI: 1114909454

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: Yes

IHP-SAN DIEGO FAMILY CARE
4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax:

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

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

MAY, LOUIS M

Provider ID: 569783

Provider Gender: Male

License number: A138568

NPI: 1720497514

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Eisenhower
Medical Ctr

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

286 EUCLID AVE STE 302

SAN DIEGO, CA 92114-3613

Phone: (619) 662-4100

Fax: (619) 428-7952

After Hours Phone: (619)

662-4100

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

NANDURI, RAMACHANDER

Provider ID: 22720

Provider Gender: Male

License number: C50916

NPI: 1093721896

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Kannada, Spanish, Tamil,
Telugu

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

995 GATEWAY CENTER WAY
STE 202

SAN DIEGO, CA 92102-4545

Phone: (619) 264-3107

Fax: (619) 264-6927

After Hours Phone: (619)
264-3107

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

NARANJO, RODRIGO A

Provider ID: 206046

Provider Gender: Male

License number: A119010

NPI: 1609095264

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

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

NARANJO, RODRIGO A

Provider ID: 482070

Provider Gender: Male

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

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

C. Directorio de proveedores de atención primaria

License number: A119010
NPI: 1609095264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

NGUYEN, TUE T , MD

Provider ID: 44830
Provider Gender: Female
License number: A49831
NPI: 1548226178
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4551 EL CAJON BLVD
SAN DIEGO, CA 92115-4316

Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (619) 280-7185
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-SA 9AM-5PM

PARIKH, MILIND D

Provider ID: 206363
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male
License number: A119631
NPI: 1730381385
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

RESNIKOFF, PAMELA M

Provider ID: 417937
Provider Gender: Female
License number: G80358
NPI: 1841252533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545

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

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

C. Directorio de proveedores de atención primaria

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

RIVERA, TANIA L

Provider ID: 206363

Provider Gender: Female

License number: A126958

NPI: 1336346972

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Scripps

Memorial Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

ROLDAN, ANSELMO

Provider ID: 100798

Provider Gender: Male

License number: A42177

NPI: 1790898369

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 3490 PALM AVE

SAN DIEGO, CA 92154-1664

Phone: (619) 423-5616

Fax: (619) 423-5684

After Hours Phone: (619) 423-5616

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

SMILDE, RENEE I

Provider ID: 417937

Provider Gender: Female

License number: A70175

NPI: 1427010594

Provider English Spoken: Yes

Provider Language(s) Spoken:

Dutch

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital

Chula Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

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

SMITH, DAVID M

Provider ID: 206362

Provider Gender: Male

License number: A63610

NPI: 1609891761

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

SMITH, DAVID M

Provider ID: 417937

Provider Gender: Male

License number: A63610

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

C. Directorio de proveedores de atención primaria

NPI: 1609891761
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

TRUONG, TU N , MD

Provider ID: 53396
Provider Gender: Male
License number: A50756
NPI: 1194794263
Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Ucsd La Jolla John Sally Thornton, Alvarado Hospital Llc, Kindred Hospital San Diego
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5069 EL CAJON BLVD
SAN DIEGO, CA 92115-3348

Phone: (619) 583-8705
Fax: (619) 583-8701
After Hours Phone: (619) 583-8705
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: IB, E, R, W
Hours: M-SA 9AM-5PM

VIDAURRAZAGA, MONICA M

Provider ID: 417937
Provider Gender: Female
License number: A169207
NPI: 1346628310
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

VO, SONY T , MD

Provider ID: 44927
Provider Gender: Male

License number: A49788
NPI: 1427003938
Provider English Spoken: Yes
Provider Language(s) Spoken: Bulgarian, Chinese, Mandarin, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4551 EL CAJON BLVD
SAN DIEGO, CA 92115-4316
Phone: (619) 280-7185
Fax: (619) 280-0994
After Hours Phone: (619) 280-7185
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM

WASTILA, LISA J

Provider ID: 403583
Provider Gender: Female
License number: A60801
NPI: 1043375231
Provider English Spoken: Yes
Provider Language(s) Spoken: German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

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

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

C. Directorio de proveedores de atención primaria

Phone: (619) 233-8500

Fax:

After Hours Phone: (619)
233-8500

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

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

WATTS, ELI M

Provider ID: 451167

Provider Gender: Male

License number: A79383

NPI: 1649373739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-F 8AM-5PM, SA
8AM-4PM

WONG, ARTHUR D

Provider ID: 417937

Provider Gender: Male

License number: A163178

NPI: 1023639176

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

YUNG, STEVEN A

Provider ID: 417937

Provider Gender: Male

License number: G80798

NPI: 1689636656

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 206363

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 263-2499

Fax:

After Hours Phone: (619)

263-2499

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

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

C. Directorio de proveedores de atención primaria

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

SHETABI, KAMBIZ

Provider ID: 206363
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,

Provider ID: 179619
Provider Gender:
License number:
NPI: 1578672184
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
UCSD MEDICAL GROUP
 330 LEWIS ST # 400
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax: (619) 471-9310
After Hours Phone: (619) 471-9260
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM

UCSD MEDICAL GROUP,

Provider ID: 179639
Provider Gender:
License number:
NPI: 1508968751
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 25/120
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA

9AM-5PM

NEPHROLOGY

REDDY, SAMATHHA R

Provider ID: 418535
Provider Gender: Female
License number: A120797
NPI: 1659620854
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Sharp Chula Vista Med Ctr, St Agnes Medical Center
Board Certified Specialty: No
OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM, SA 9AM-5PM

NEUROLOGY

GRISOLIA, JAMES S

Provider ID: 417937
Provider Gender: Male

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C. Directorio de proveedores de atención primaria

License number: G42884
NPI: 1336102359
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

MARTIN, FREDERIC R

Provider ID: 417937
Provider Gender: Male
License number: G61965
NPI: 1265582605
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Vibra Hospital Of San Diego, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 206353
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

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

ALIMONOS, LYSISTRATI A

Provider ID: 206360
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A

Provider ID: 206362
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No

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

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

ALIMONOS, LYSISTRATI A
Provider ID: 206363
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,

T, ME
Hours: M-SA 9AM-5PM
ALIMONOS, LYSISTRATI A
Provider ID: 402851
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W, F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

ALIMONOS, LYSISTRATI A
Provider ID: 416831
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-TH 8AM-5PM, F, SA
9AM-5PM

BLAKE, GARY D
Provider ID: 206046
Provider Gender: Male
License number: G44807
NPI: 1497738439
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA

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C. Directorio de proveedores de atención primaria

9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206353

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206360

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206362

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206363

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)

515-2420

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,

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

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

C. Directorio de proveedores de atención primaria

T, ME Hours: M-SA 9AM-5PM	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns	SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621
BUECHNER, CHARLENE A <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM	<i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM
BUECHNER, CHARLENE A <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish	CAMPBELL, ELIZABETH C <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> 20A6763 <i>NPI:</i> 1932147329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF	CAMPBELL, ELIZABETH C <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> 20A6763 <i>NPI:</i> 1932147329 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i>

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 206363

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 402851

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:*

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

CAMPBELL, ELIZABETH C

Provider ID: 416831

Provider Gender: Female

License number: 20A6763

NPI: 1932147329

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center,

Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

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

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

CARTER, KHALIL J

Provider ID: 206353

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

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C. Directorio de proveedores de atención primaria

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

CARTER, KHALIL J

Provider ID: 206360
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sutter Davis
 Hospital, Sutter Medical Center
 Sacramento, Grossmont
 Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206362
Provider Gender: Male
License number: A113001
NPI: 1225231582

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
 515-2424
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206363
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2420
Fax:
After Hours Phone: (619)
 515-2420

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

CARTER, KHALIL J

Provider ID: 402851
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
 515-2444
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-W, F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 416831
Provider Gender: Male
License number: A113001
NPI: 1225231582

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

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F, SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206353
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206360
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2561
Fax:
After Hours Phone: (619) 515-2561
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206362
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 206363
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont

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

C. Directorio de proveedores de atención primaria

Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560

Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org

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

CERVANTES, SANDRA M

Provider ID: 402851
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444

Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

CERVANTES, SANDRA M

Provider ID: 416831
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206353
Provider Gender: Male
License number: A108228
NPI: 1629277322

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206360
Provider Gender: Male
License number: A108228
NPI: 1629277322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): 3705 MISSION BLVD
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 206363
Provider Gender: Male
License number: A108228
NPI: 1629277322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 402851
Provider Gender: Male
License number: A108228
NPI: 1629277322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
 515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

DE MIK, TRAVIS J

Provider ID: 416831
Provider Gender: Male
License number: A108228
NPI: 1629277322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, ME
Hours: M-TH 8AM-5PM, F,SA
 9AM-5PM

FAKSH, ARIJ

Provider ID: 185268
Provider Gender: Female
License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Tri City
 Medical Ctr, Scripps Mercy
 Hospital, Scripps Green Hospital,
 Scripps Memorial Hospital
 Encinitas, Scripps Memorial
 Hospital, Scripps Mercy Hospital
 Chula Vista
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-7072
Fax:
After Hours Phone: (619)
 280-7072
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206353
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency: No

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

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

C. Directorio de proveedores de atención primaria

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206360

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206362

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 206363

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 402851

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email:

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

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

C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 416831
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:

After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

GRANT, REBEKAH I

Provider ID: 206360
Provider Gender: Female
License number: C159737
NPI: 1326243833

Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Riverside Community Hosp, Hoag Hospital Irvine
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

HANLEY, LAUREN E

Provider ID: 206353
Provider Gender: Female
License number: C174771
NPI: 1053392035
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

HANLEY, LAUREN E

Provider ID: 206360
Provider Gender: Female
License number: C174771
NPI: 1053392035
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

HANLEY, LAUREN E

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

C. Directorio de proveedores de atención primaria

Provider ID: 206363 Provider Gender: Female License number: C174771 NPI: 1053392035 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2560 Fax: After Hours Phone: (619) 515-2560 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM	3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2444 Fax: After Hours Phone: (619) 515-2444 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM	Hours: M-TH 8AM-5PM, F,SA 9AM-5PM KELLY, THOMAS F Provider ID: 233597 Provider Gender: Male License number: G60630 NPI: 1336203496 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center Board Certified Specialty: No IHP-SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: After Hours Phone: (619) 563-0250 Website: www.sdfamilycare.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 8AM-2PM
HANLEY, LAUREN E Provider ID: 402851 Provider Gender: Female License number: C174771 NPI: 1053392035 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: After Hours Phone: (619) 515-2424 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME	HANLEY, LAUREN E Provider ID: 416831 Provider Gender: Female License number: C174771 NPI: 1053392035 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Grossmont Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: After Hours Phone: (619) 515-2424 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME	LIPSCHITZ, LISA S Provider ID: 206353 Provider Gender: Female License number: A72005 NPI: 1649208711 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No

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C. Directorio de proveedores de atención primaria

Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 206360
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 206362
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 206363
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

LIPSCHITZ, LISA S

Provider ID: 402851
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org

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

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

C. Directorio de proveedores de atención primaria

<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM LIPSCHITZ, LISA S <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM LOEFFLER, ALLISON M <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female	<i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM LOEFFLER, ALLISON M <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME	1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM LOEFFLER, ALLISON M <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> A116680 <i>NPI:</i> 1700073962 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 206363

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 402851

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula
Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

LOEFFLER, ALLISON M

Provider ID: 416831

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

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

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

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206353

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206360

Provider Gender: Female

License number: A114181

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C. Directorio de proveedores de atención primaria

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
SAN DIEGO**

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ **Accessibility:** ME

Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206362

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
SAN DIEGO**

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206363

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
SAN DIEGO**

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 402851

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
**FAMILY HEALTH CENTERS OF
SAN DIEGO**

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ **Accessibility:**

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

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 416831

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

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

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

C. Directorio de proveedores de atención primaria

SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

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

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

PHAN, TIFFANI T

Provider ID: 417101

Provider Gender: Female

License number: A161105

NPI: 1134515695

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

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

Board Certified Specialty: No

OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Website:

www.operationsamahan.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-4:30PM, SA
9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206353

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206360

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206362

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

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

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

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

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206363

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 402851

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (616) 515-2444

Fax:

After Hours Phone: (616)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

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

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 416831

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

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

Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

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

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

SAPRA, SONIA V

Provider ID: 206353

Provider Gender: Female

License number: A164859

NPI: 1952751711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

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

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

C. Directorio de proveedores de atención primaria

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM SAPRA, SONIA V <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> A164859 <i>NPI:</i> 1952751711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM SAPRA, SONIA V <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Female <i>License number:</i> A164859 <i>NPI:</i> 1952751711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy	Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM SAPRA, SONIA V <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> A164859 <i>NPI:</i> 1952751711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM SAPRA, SONIA V <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A164859 <i>NPI:</i> 1952751711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM SHUCKETT, ARIEL <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> A144372 <i>NPI:</i> 1245590124 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, W
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SINGH, RASHMI

Provider ID: 206353
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

SINGH, RASHMI

Provider ID: 206360
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2424
Fax:

After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

SINGH, RASHMI

Provider ID: 206363
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560

Fax:
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM

SINGH, RASHMI

Provider ID: 402851
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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C. Directorio de proveedores de atención primaria

American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM

SINGH, RASHMI

Provider ID: 416831
Provider Gender: Female
License number: A168236
NPI: 1679937619
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

TRUJILLO, JENNIFER C

Provider ID: 451167
Provider Gender: Female
License number: 20A8204
NPI: 1053407593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

WINESBURG, JENNIFER J

Provider ID: 206353
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400

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

WINESBURG, JENNIFER J

Provider ID: 206360
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206362
Provider Gender: Female

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C. Directorio de proveedores de atención primaria

License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206363
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
 Board Certified Specialty: No

FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2420
 Fax:
 After Hours Phone: (619) 515-2420
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 402851
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Desert Regional Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:

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

WINESBURG, JENNIFER J

Provider ID: 416831
 Provider Gender: Female
 License number: 20A11535
 NPI: 1811162456
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206353
 Provider Gender: Male
 License number: G78814
 NPI: 1699790634
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No

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

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

C. Directorio de proveedores de atención primaria

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206360

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206362

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206363

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

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

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 402851

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

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

C. Directorio de proveedores de atención primaria

Hospital Chula Vista
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444

Fax:
After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

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

ZIEG, ALAN J

Provider ID: 416831

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

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

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

OPHTHALMOLOGY

NAJAFI, DAVID J

Provider ID: 206360

Provider Gender: Male

License number: A68124

NPI: 1396715991

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp

Memorial Hospital, Grossmont

Hospital, Scripps Mercy Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: ME

Hours: M-SA 9AM-5PM

SHAW, BLAKE R

Provider ID: 206360

Provider Gender: Male

License number: G61394

NPI: 1649206541

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: ME

Hours: M-SA 9AM-5PM

SHAW, BLAKE R

Provider ID: 206363

Provider Gender: Male

License number: G61394

NPI: 1649206541

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

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

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

C. Directorio de proveedores de atención primaria

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

ZABLIT, KARIM V

Provider ID: 403583
Provider Gender: Male
License number: A42127
NPI: 1083700538
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500

Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

OTOLARYNGOLOGY

CRAWFORD, KAYVA L

Provider ID: 206360
Provider Gender: Female
License number: A165819
NPI: 1396241824

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

PEDIATRICS

ABELL, GEOFFREY A

Provider ID: 27341
Provider Gender: Male
License number: A98712
NPI: 1245256130
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114-3629

Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

ADJAN, ROULA S

Provider ID: 185268
Provider Gender: Female
License number: A81682
NPI: 1992847263
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax: (619) 749-5480
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ADLOUNI, LOUBABA A

Provider ID: 230441
Provider Gender: Female
License number: A63201

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

C. Directorio de proveedores de atención primaria

NPI: 1669443685
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital, Palomar Health Downtown Campus, Palomar Medical Center
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 16918 DOVE CANYON RD STE 200
 SAN DIEGO, CA 92127-3457
 Phone: (858) 924-1960
 Fax: (858) 924-1964
 After Hours Phone: (858) 924-1960
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

AMANI, RAMIN

Provider ID: 537708
 Provider Gender: Male
 License number: A53984
 NPI: 1659366292
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Persian, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5222 BALBOA AVE STE 42
 SAN DIEGO, CA 92117-6991

Phone: (858) 268-0702
 Fax: (858) 268-0374
 After Hours Phone: (858) 268-0702
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

AMATYA, SUDHA

Provider ID: 206353
 Provider Gender: Female
 License number: A51563
 NPI: 1790830511
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM

ANDREE, GREGOR

Provider ID: 233532
 Provider Gender: Male

License number: A72833
 NPI: 1467436063
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
 Phone: (619) 280-2058
 Fax:
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/22
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 8AM-2PM

ANDREE, GREGOR

Provider ID: 482070
 Provider Gender: Male
 License number: A72833
 NPI: 1467436063
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org

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

C. Directorio de proveedores de atención primaria

<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	Hospital San Diego, Sharp Chula Vista Med Ctr, Fresno Community Hospital, Clovis Community Hospital <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 292 EUCLID AVE STE 220 SAN DIEGO, CA 92114-3629 <i>Phone:</i> (619) 262-8624 <i>Fax:</i> (619) 262-6639 <i>After Hours Phone:</i> (619) 262-8624 <i>Website:</i>
ARCHAMBAULT, CHRISTIAN F <i>Provider ID:</i> 5589 <i>Provider Gender:</i> Male <i>License number:</i> A74776 <i>NPI:</i> 1992776918 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Pomerado Hospital, Sharp Mary Birch Hosp For Women And Newborns, Paradise Valley Hospital, Childrens Hospital Of Orange County <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 16918 DOVE CANYON RD STE 200 SAN DIEGO, CA 92127-3457 <i>Phone:</i> (858) 924-1960 <i>Fax:</i> (858) 924-1964 <i>After Hours Phone:</i> (858) 924-1960 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No	AYSON, NICOLE M <i>Provider ID:</i> 417429 <i>Provider Gender:</i> Female <i>License number:</i> A128091 <i>NPI:</i> 1013278704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2525 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2525 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM
	AZIMI, AYSUN <i>Provider ID:</i> 317194 <i>Provider Gender:</i> Female <i>License number:</i> 20A13331 <i>NPI:</i> 1710246160 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens	BONSU, BEMA K <i>Provider ID:</i> 227409 <i>Provider Gender:</i> Male <i>License number:</i> C55180 <i>NPI:</i> 1932106986 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i>

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

C. Directorio de proveedores de atención primaria

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

BOWERS, JESSIE S

Provider ID: 394841
Provider Gender: Female
License number: A138429
NPI: 1730594235
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 12036 SCRIPPS HIGHLANDS DR # 102
 SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

CARSON, STEPHEN H

Provider ID: 6735
Provider Gender: Male
License number: G39308
NPI: 1780719872
Provider English Spoken: Yes
Provider Language(s) Spoken: French
 Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Mercy Hospital, Rady Childrens Hospital San Diego
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK

550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License number: A111170
NPI: 1417279324
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian, Spanish
 Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:

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

CHANG, IRENE S

Provider ID: 373725
Provider Gender: Female
License number: A73533
NPI: 1790756799
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Pomerado Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 16918 DOVE CANYON RD STE 200
 SAN DIEGO, CA 92127-3457
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

CHEN, JENNIFER K

Provider ID: 206363
Provider Gender: Female
License number: A141057

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C. Directorio de proveedores de atención primaria

NPI: 1255785150
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 Fax:

After Hours Phone: (619)
 515-2560
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, ME
 Hours: M-SA 9AM-5PM

COHEN, STUART A

Provider ID: 59888
 Provider Gender: Male
 License number: A43097
 NPI: 1972574994
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, Hebrew
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Sharp Memorial
 Hospital, Rady Childrens
 Hospital San Diego, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 6699 ALVARADO RD STE 2200
 SAN DIEGO, CA 92120-5253

Phone: (619) 265-3400
 Fax: (619) 265-3407
 After Hours Phone: (619)
 265-3400
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM

CONE, STEPHANIE E

Provider ID: 185268
 Provider Gender: Female
 License number: A123929
 NPI: 1437444858
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 255-9154

Fax:
 After Hours Phone: (619)
 255-9154
 Website: www.lamaestra.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

CORDES, WILLIAM D

Provider ID: 206360
 Provider Gender: Male
 License number: 20A15743
 NPI: 1174942544
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M

Provider ID: 414228
 Provider Gender: Male
 License number: A50769
 NPI: 1982703898
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Memorial
 Hospital, Rady Childrens
 Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

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

C. Directorio de proveedores de atención primaria

995 GATEWAY CENTER WAY
STE 202

SAN DIEGO, CA 92102-4545

Phone: (619) 264-3107

Fax: (619) 264-6927

After Hours Phone: (619)
264-3107

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M

Provider ID: 73767

Provider Gender: Male

License number: A50769

NPI: 1982703898

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Rady Childrens
Hospital San Diego

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500

Phone: (619) 264-3107

Fax: (619) 264-6927

After Hours Phone: (619)
264-3107

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

DE LA MORA, OSCAR M , MD

Provider ID: 73767

Provider Gender: Male

License number: A50769

NPI: 1982703898

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Rady Childrens
Hospital San Diego

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500

Phone: (619) 264-3107

Fax: (619) 264-6927

After Hours Phone: (619)
264-3107

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

DIXON, SARAH K

Provider ID: 482070

Provider Gender: Female

License number: A137415

NPI: 1467751131

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

FISHMAN, ELENA

Provider ID: 524340

Provider Gender: Female

License number: A78221

NPI: 1740249432

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency: No

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

11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130-2597

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858)
793-1011

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

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

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

C. Directorio de proveedores de atención primaria

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

FORTUNE, ERIN L

Provider ID: 206360
Provider Gender: Male
License number: A95577
NPI: 1801088422
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

FORTUNE, ERIN L

Provider ID: 416831
Provider Gender: Male
License number: A95577
NPI: 1801088422
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F, SA 9AM-5PM

FRIEDMAN, JAIME B

Provider ID: 230500
Provider Gender: Female
License number: A79195
NPI: 1144297961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 16918 DOVE CANYON RD STE 200
 SAN DIEGO, CA 92127-3457
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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

GOVENDER, SHAMINI M

Provider ID: 469539
Provider Gender: Female
License number: C52845
NPI: 1962504423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2790 TRUXTUN RD STE 120A
 SAN DIEGO, CA 92106-6135
Phone: (619) 222-1253
Fax: (619) 222-1276
After Hours Phone: (619) 222-1253
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

GUPTA, VARSHA

Provider ID: 416831
Provider Gender: Female
License number: A164889
NPI: 1891283214
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

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C. Directorio de proveedores de atención primaria

3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

HANSEN, JOHN C

Provider ID: 318919
Provider Gender: Male
License number: G68382
NPI: 1780655621
Provider English Spoken: Yes
Provider Language(s) Spoken:
Danish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Sharp Mary Birch Hosp For
Women And Newborns
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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

HENDERSON, TREVOR H

Provider ID: 58111
Provider Gender: Male
License number: A65341
NPI: 1356449425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Mary Birch Hosp
For Women And Newborns,
Rady Childrens Hospital San
Diego, Alvarado Hospital Llc
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120-5253
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619)
265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

HIBBS, NICOLE M

Provider ID: 143979
Provider Gender: Female
License number: A106600
NPI: 1164627832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619)
297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

HIGUERA, GRISELDA

Provider ID: 206353
Provider Gender: Female
License number: C169681
NPI: 1447589809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

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C. Directorio de proveedores de atención primaria

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

HOANG, VY U

Provider ID: 161902
 Provider Gender: Female
 License number: A125768
 NPI: 1649575135
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 6699 ALVARADO RD
 SAN DIEGO, CA 92120-5244
 Phone: (619) 265-3400
 Fax: (619) 265-3407
 After Hours Phone: (619) 265-3400
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

JACOBSON, EUGENIA

Provider ID: 104033
 Provider Gender: Female
 License number: A56064
 NPI: 1356416408
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Russian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 335
 SAN DIEGO, CA 92123-2753
 Phone: (858) 576-8010
 Fax: (858) 576-7391
 After Hours Phone: (858) 576-8010
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

JORDAN, JAMIE M

Provider ID: 237831
 Provider Gender: Female
 License number: A119363
 NPI: 1275762833
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 12036 SCRIPPS HIGHLANDS DR # 102
 SAN DIEGO, CA 92131-5155

Phone: (858) 566-4444
 Fax: (858) 566-3321
 After Hours Phone: (858) 566-4444
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

JUAREZ, PATRICIA P

Provider ID: 317641
 Provider Gender: Female
 License number: G55860
 NPI: 1205807229
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
 Phone: (858) 495-0500
 Fax: (858) 560-4279
 After Hours Phone: (858) 495-0500
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

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

C. Directorio de proveedores de atención primaria

KARMAKAR, KANKA

Provider ID: 417101
Provider Gender: Female
License number: C54941
NPI: 1972536654
Provider English Spoken: Yes
Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website:
www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-4:30PM, SA 9AM-5PM

LE, NGUYEN L

Provider ID: 44952
Provider Gender: Male
License number: A83309
NPI: 1548308109
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Childrens Hosp And

Resrch Ctr At Oakland, Sharp Memorial Hospital
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

5507 EL CAJON BLVD # B
 SAN DIEGO, CA 92115-3624
Phone: (619) 582-8814
Fax: (619) 582-8813
After Hours Phone: (619) 582-8814
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

LOPER, KAREN S

Provider ID: 490610
Provider Gender: Female
License number: G76438
NPI: 1619908936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 550 WASHINGTON ST STE 300
 SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

☞ *Accessibility:*
Hours: M-SA 9AM-5PM

LUJAN, ARLEEN G

Provider ID: 206360
Provider Gender: Female
License number: A61687
NPI: 1760412431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

MACQUARRIE, ANN S

Provider ID: 416831
Provider Gender: Female
License number: A165236
NPI: 1134625460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO

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C. Directorio de proveedores de atención primaria

3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Website: www.fhcscd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

MADANY, GEORGE H

Provider ID: 318924
Provider Gender: Male
License number: G79990
NPI: 1811968837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital Chula
Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
MAHENDRAN, SRIVIDYA A
Provider ID: 581644
Provider Gender: Female
License number: A92173
NPI: 1487843454
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

MANRIQUEZ-CASTILLO, ERENDIRA

Provider ID: 185268
Provider Gender: Female
License number: A75533
NPI: 1356397418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Rady
Childrens Hospital San Diego
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
9AM-5PM

MARTINEZ ANDREE, INGRID L

Provider ID: 319049
Provider Gender: Female
License number: A63054
NPI: 1205807203
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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

C. Directorio de proveedores de atención primaria

MCGOWAN, KAREN A <i>Provider ID:</i> 386001 <i>Provider Gender:</i> Female <i>License number:</i> A60624 <i>NPI:</i> 1851380729 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 6475 ALVARADO RD STE 120 SAN DIEGO, CA 92120-5007 <i>Phone:</i> (619) 583-6133 <i>Fax:</i> (619) 583-0321 <i>After Hours Phone:</i> (619) 583-6133 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-TH 8AM-5PM, F,SA 9AM-5PM	<i>Hours:</i> M-SA 9AM-5PM PARK, TARI Y <i>Provider ID:</i> 237711 <i>Provider Gender:</i> Female <i>License number:</i> A74537 <i>NPI:</i> 1285669085 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 12036 SCRIPPS HIGHLANDS DR # 102 SAN DIEGO, CA 92131-5155 <i>Phone:</i> (858) 566-4444 <i>Fax:</i> (858) 566-3321 <i>After Hours Phone:</i> (858) 566-4444 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
NGUYEN, JANICE <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A157335 <i>NPI:</i> 1760916589 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120	PARKER, SHERINE B <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> G81658 <i>NPI:</i> 1477626513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME	PAVLOVICH, WENDY D <i>Provider ID:</i> 416831 <i>Provider Gender:</i> Female <i>License number:</i> A126181 <i>NPI:</i> 1740467299 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Board Certified Specialty:</i> No

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

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F, SA 9AM-5PM

POWELL, STEPHANIE J

Provider ID: 319033
Provider Gender: Female
License number: A76747
NPI: 1720059744
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 400
SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

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

PRESKILL, CATALINA P

Provider ID: 403583
Provider Gender: Female
License number: G29879
NPI: 1598088759
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

RHODUS, CECILIA M

Provider ID: 206363
Provider Gender: Female
License number: A137260
NPI: 1699161059
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Northern Inyo Hosp, Rady Childrens Hospital San Diego

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

RISSMAN, RAQUEL L

Provider ID: 103726
Provider Gender: Female
License number: A82394
NPI: 1700998846
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103-2227
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

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

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

C. Directorio de proveedores de atención primaria

No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM	4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: (619) 255-9155 Fax: After Hours Phone: (619) 255-9155 Website: www.lamaestra.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, W Hours: M-F 8AM-5PM, SA 9AM-5PM	No ♿ Accessibility: Hours: M-SA 9AM-5PM
RODRIGUEZ, ALDO E Provider ID: 451167 Provider Gender: Male License number: A134995 NPI: 1508209651 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.iypsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 8AM-5PM, SA 8AM-4PM	RUBENSTEIN, STUART I Provider ID: 521305 Provider Gender: Male License number: G60587 NPI: 1689633844 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 11943 EL CAMINO REAL STE 210 SAN DIEGO, CA 92130-2597 Phone: (858) 793-1011 Fax: (858) 793-1035 After Hours Phone: (858) 793-1011 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL):	SAMPATH, SRIVIDYA N Provider ID: 416831 Provider Gender: Female License number: A132576 NPI: 1275892754 Provider English Spoken: Yes Provider Language(s) Spoken: French Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 3514 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: After Hours Phone: (619) 515-2424 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-TH 8AM-5PM, F, SA 9AM-5PM
RODRIGUEZ, JAVIER Provider ID: 185268 Provider Gender: Male License number: A82639 NPI: 1013059385 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No LA MAESTRA FAMILY CLINIC		SCHMITT, STEPHANIE G Provider ID: 416831 Provider Gender: Female License number: A164979 NPI: 1992202170 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No

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

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F, SA 9AM-5PM

SCHNEIDER, SARAH M
Provider ID: 206360
Provider Gender: Female
License number: A151631
NPI: 1508210311
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME

Hours: M-SA 9AM-5PM
SEBSO, JODI
Provider ID: 206360
Provider Gender: Female
License number: A103099
NPI: 1538484316
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SEBSO, JODI
Provider ID: 416831
Provider Gender: Female
License number: A103099
NPI: 1538484316
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3514 30TH ST

SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-TH 8AM-5PM, F, SA 9AM-5PM

SELLERS, JAIME P
Provider ID: 206360
Provider Gender: Female
License number: A159494
NPI: 1720512015
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

SHAH, SEEMA

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

C. Directorio de proveedores de atención primaria

Provider ID: 575712
Provider Gender: Female
License number: A77978
NPI: 1629131107
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
12036 SCRIPPS HIGHLANDS DR # 102
SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

SHENOY, ASHVIN B

Provider ID: 232392
Provider Gender: Male
License number: A123017
NPI: 1619262664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch

Hosp For Women And Newborns, Scripps Mercy Hospital
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
292 EUCLID AVE STE 220
SAN DIEGO, CA 92114-3629
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: EB, IB, E, R
Hours: M-SA 9AM-5PM

SHETH, HASMUKH L

Provider ID: 451167
Provider Gender: Male
License number: A45942
NPI: 1396812236
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihsocal.org
Email:
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8AM-5PM, SA 8AM-4PM

SHIAU, NANCY H

Provider ID: 40852
Provider Gender: Female
License number: A71292
NPI: 1750352779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp For Women And Newborns, Alvarado Hosp Med Ctr
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120-5253
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

SNYDER, JOEL M

Provider ID: 24734
Provider Gender: Male
License number: G39469

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

C. Directorio de proveedores de atención primaria

NPI: 1487748018
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 6475 ALVARADO RD STE 120
 SAN DIEGO, CA 92120-5007
 Phone: (619) 583-6133
 Fax: (619) 583-0321
 After Hours Phone: (619) 583-6133
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M-SA 9AM-5PM

SPITZER, MARSHA D

Provider ID: 206360
 Provider Gender: Female
 License number: A76785
 NPI: 1851323315
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM

SPITZER, MARSHA D

Provider ID: 402851
 Provider Gender: Female
 License number: A76785
 NPI: 1851323315
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2444
 Fax:
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-W, F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM

SPITZER, MARSHA D

Provider ID: 417429

Provider Gender: Female
 License number: A76785
 NPI: 1851323315
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2525
 Fax:
 After Hours Phone: (619) 515-2525
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

SPRAGUE, KIMBERLY A

Provider ID: 233532
 Provider Gender: Female
 License number: A115276
 NPI: 1366850463
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690

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

C. Directorio de proveedores de atención primaria

Phone: (619) 280-2058
 Fax:
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/22
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, W
 Hours: M-F 8AM-5PM, SA 8AM-2PM

SPRAGUE, KIMBERLY A

Provider ID: 482070
 Provider Gender: Female
 License number: A115276
 NPI: 1366850463
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax:
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, W
 Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

STAFFORD, DIANA G

Provider ID: 435414

Provider Gender: Female
 License number: A150668
 NPI: 1225322183
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 6475 ALVARADO RD STE 120
 SAN DIEGO, CA 92120-5007
 Phone: (619) 583-6133
 Fax: (619) 583-0321
 After Hours Phone: (619) 583-6133
 Website:
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

SULEIMAN QAFITI, KHAWLA H

Provider ID: 416831
 Provider Gender: Female
 License number: A51318
 NPI: 1659303121
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3514 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:
 After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-TH 8AM-5PM, F,SA 9AM-5PM

TAMAYO, MAITHE F

Provider ID: 206360
 Provider Gender: Female
 License number: A80504
 NPI: 1487748430
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM

TAMAYO, MAITHE F

Provider ID: 356145
 Provider Gender: Female
 License number: A80504

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

C. Directorio de proveedores de atención primaria

NPI: 1487748430 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 2391 ISLAND AVE SAN DIEGO, CA 92102-2941 Phone: (619) 515-2435 Fax: After Hours Phone: (619) 515-2435 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM TSANG, RUEY-SHIUAN T Provider ID: 319055 Provider Gender: Female License number: A127164 NPI: 1518228188 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	7910 FROST ST STE 400 SAN DIEGO, CA 92123-2753 Phone: (858) 495-0500 Fax: (858) 560-4279 After Hours Phone: (858) 495-0500 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM VU, MYLOAN T Provider ID: 101443 Provider Gender: Female License number: A45749 NPI: 1457453177 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Rady Childrens Hospital San Diego, Grossmont Hospital Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 6699 ALVARADO RD STE 2200 SAN DIEGO, CA 92120-5253 Phone: (619) 265-3400 Fax: (619) 265-3407 After Hours Phone: (619) 265-3400 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: W	Hours: M-SA 9AM-5PM WASSON, MINA K Provider ID: 524333 Provider Gender: Female License number: C167860 NPI: 1366753022 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 11943 EL CAMINO REAL STE 210 SAN DIEGO, CA 92130-2597 Phone: (858) 793-1011 Fax: (858) 793-1035 After Hours Phone: (858) 793-1011 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM WATERS, ELIZABETH J Provider ID: 153090 Provider Gender: Female License number: A113933 NPI: 1730477621 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital, Rady Childrens
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 292 EUCLID AVE STE 220
 SAN DIEGO, CA 92114-3629
Phone: (619) 262-8624
Fax: (619) 262-6639
After Hours Phone: (619) 262-8624
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:* EB, IB, E, R
Hours: M-SA 9AM-5PM

WONG, YOLANDA Y
Provider ID: 233532
Provider Gender: Female
License number: A94449
NPI: 1851599872
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058
Fax:
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL): No

☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 8AM-2PM

WONG, YOLANDA Y
Provider ID: 482070
Provider Gender: Female
License number: A94449
NPI: 1851599872
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, W
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM

ZAGULI, MARVIN J
Provider ID: 237793
Provider Gender: Male
License number: G38188
NPI: 1508837501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 12036 SCRIPPS HIGHLANDS DR # 102
 SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

ZAGULI, MARVIN J
Provider ID: 319041
Provider Gender: Male
License number: G38188
NPI: 1508837501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website:

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

C. Directorio de proveedores de atención primaria

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

ZAHEER, AARON A

Provider ID: 233532
Provider Gender: Male
License number: A61238
NPI: 1902882301
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2058

Fax:
After Hours Phone: (619)
 280-2058
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/22
American Sign Language (ASL):
 No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA
 8AM-2PM

ZAHEER, AARON A

Provider ID: 482070
Provider Gender: Male
License number: A61238
NPI: 1902882301
Provider English Spoken: Yes
Provider Language(s) Spoken:

Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax:
After Hours Phone: (858)
 810-8700
Website: www.sdfamilycare.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: P, EB, IB, E, R,
 W
Hours: M,W-F 8:30AM-5:30PM,
 TU 8:30AM-8:30PM, SA
 9AM-4PM

ZANDKARIMI, FARIBA

Provider ID: 206360
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

ACOSTA, ANGELICA N

Provider ID: 206360
Provider Gender: Female
License number: PA16245
NPI: 1952513517
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

ACOSTA, ANGELICA N

Provider ID: 356145

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

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: PA16245
NPI: 1952513517
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax:
After Hours Phone: (619) 515-2435
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

AGUILAR-URREA, RUTH N

Provider ID: 206360
Provider Gender: Female
License number: PA54661
NPI: 1699298190
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

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

ALVARADO, EDMUND R

Provider ID: 206360
Provider Gender: Male
License number: PA20888
NPI: 1720303340
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

ARMENTA, JORGE

Provider ID: 185268
Provider Gender: Male
License number: PA13694
NPI: 1346382611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

BATISTA, OSVALDO

Provider ID: 206360
Provider Gender: Male
License number: PA17864
NPI: 1245349224
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CASTILLO, PATRICIA <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Female <i>License number:</i> PA17220 <i>NPI:</i> 1376550657 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚡ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚡ <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM CHUCKA, RITA M <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> PA58098 <i>NPI:</i> 1659745362 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚡ <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	<i>NPI:</i> 1679096341 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-ST VINCENT DE PAUL VILLA 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 <i>Phone:</i> (619) 233-8500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 233-8500 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ⚡ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 9AM-5PM
CHAN, TIFFANY C <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> PA23258 <i>NPI:</i> 1790111607 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113	CONTRERAS, LORETTA L <i>Provider ID:</i> 403583 <i>Provider Gender:</i> Female <i>License number:</i> PA54617	DAVID, MARVIC T <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> PA53748 <i>NPI:</i> 1750832317 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: ME Hours: M-SA 9AM-5PM	SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2426 Fax: After Hours Phone: (619) 515-2426 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM	DRAME, SALWA S Provider ID: 417987 Provider Gender: Female License number: PA59481 NPI: 1093136426 Provider English Spoken: Yes Provider Language(s) Spoken: French, Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2426 Fax: After Hours Phone: (619) 515-2426 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
DOLMETSCH, JEANETTE Provider ID: 206353 Provider Gender: Female License number: PA58905 NPI: 1164941456 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM	DRAME, SALWA S Provider ID: 206353 Provider Gender: Female License number: PA59481 NPI: 1093136426 Provider English Spoken: Yes Provider Language(s) Spoken: French, Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM	FINK, PATRICK M Provider ID: 402851 Provider Gender: Male License number: PA52704 NPI: 1922380328 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
DOLMETSCH, JEANETTE Provider ID: 417987 Provider Gender: Female License number: PA58905 NPI: 1164941456 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF	DOLMETSCH, JEANETTE Provider ID: 417987 Provider Gender: Female License number: PA58905 NPI: 1164941456 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF	

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

GARCIA, DEANA J

Provider ID: 416831

Provider Gender: Female

License number: PA21042

NPI: 1447567995

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

3514 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-TH 8AM-5PM, F,SA
9AM-5PM

HILL, MICHELLE

Provider ID: 206360

Provider Gender: Female

License number: PA58626

NPI: 1750820239

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

HOLM, STEVEN K

Provider ID: 206360

Provider Gender: Male

License number: PA13752

NPI: 1932257573

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

HOXMEIER, KRYSTA M

Provider ID: 206363

Provider Gender: Female

License number: PA28505

NPI: 1104203454

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

HOXMEIER, KRYSTA M

Provider ID: 418142

Provider Gender: Female

License number: PA28505

NPI: 1104203454

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

LAPINA, LORI L

Provider ID: 206362
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LAPINA, LORI L

Provider ID: 417937
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

LEON, FLOR M

Provider ID: 206360
Provider Gender: Female
License number: PA53788
NPI: 1902358237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM

LEON, FLOR M

Provider ID: 356145
Provider Gender: Female
License number: PA53788
NPI: 1902358237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 2391 ISLAND AVE
 SAN DIEGO, CA 92102-2941
Phone: (619) 515-2435
Fax:
After Hours Phone: (619) 515-2435
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

LEON, FLOR M

Provider ID: 419529
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: PA53788
 NPI: 1902358237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2325 COMMERCIAL ST STE
 1400
 SAN DIEGO, CA 92113-1195
 Phone: (619) 515-2422
 Fax:
 After Hours Phone: (619)
 515-2422
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

LE, ALEX T

Provider ID: 417429
 Provider Gender: Male
 License number: PA22762
 NPI: 1669713889
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2525
 Fax:
 After Hours Phone: (619)
 515-2525

Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM

LOPEZ, MARIO A

Provider ID: 206353
 Provider Gender: Male
 License number: PA21385
 NPI: 1932335080
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619)
 515-2400
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, ME
 Hours: M-SA 9AM-5PM

After Hours Phone: (619)
 515-2400

Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, ME
 Hours: M-SA 9AM-5PM

LOPEZ, MARIO A

Provider ID: 417937
 Provider Gender: Male
 License number: PA21385
 NPI: 1932335080
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:
 After Hours Phone: (619)
 515-2545
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM

LOPEZ, MARIO A

Provider ID: 417987
 Provider Gender: Male
 License number: PA21385
 NPI: 1932335080
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2426
 Fax:
 After Hours Phone: (619)
 515-2426
 Website: www.fhcsd.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

MARTINEZ MURGUIA, IRENE

Provider ID: 185268
Provider Gender: Female
License number: PA20296
NPI: 1447492889
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

MCELROY, MICHELLE S

Provider ID: 418142
Provider Gender: Female
License number: PA56714
NPI: 1871017541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429

Phone: (619) 515-2454
Fax:
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

MERCER, KELLY C

Provider ID: 185268
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 LA MAESTRA FAMILY CLINIC
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 255-9155
Fax:
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM

MILLER, LAUREL K

Provider ID: 206363
Provider Gender: Female

License number: PA20378
NPI: 1598992133
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

O'MARA, ROBERT J

Provider ID: 206362
Provider Gender: Male
License number: PA14526
NPI: 1336174382
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM PHUNG, AIVI L <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> PA53902 <i>NPI:</i> 1639528110 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM SCHELLIE, SCOTT A <i>Provider ID:</i> 417429 <i>Provider Gender:</i> Male <i>License number:</i> PA53288 <i>NPI:</i> 1699053843 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY # 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2525 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2525 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM TAHRIRI, BAHAREH <i>Provider ID:</i> 417987 <i>Provider Gender:</i> Female <i>License number:</i> PA51867 <i>NPI:</i> 1295147387 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2426 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2426 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	No <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM TOMASZEWSKI, DEBRA J <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Female <i>License number:</i> PA58081 <i>NPI:</i> 1215264452 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2560 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2560 <i>Website:</i> www.fhcscd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM TOMASZEWSKI, DEBRA J <i>Provider ID:</i> 206363 <i>Provider Gender:</i> Female <i>License number:</i> MT2061555 <i>NPI:</i> 1215264452 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

TREUNER, JULIE A

Provider ID: 206360
Provider Gender: Female
License number: PA17478
NPI: 1922013614
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

VARGAS, ROBERT M

Provider ID: 206360
Provider Gender: Male
License number: PA11194
NPI: 1972528081
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM

YIP, JACKIE

Provider ID: 206353
Provider Gender: Female
License number: PA20996
NPI: 1558676171
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

YOUNG-PEN, TONI E

Provider ID: 206362
Provider Gender: Female
License number: PA18746
NPI: 1932297595
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

YOUNG-PEN, TONI E

Provider ID: 233597

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: PA18746
NPI: 1932297595
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-2PM

PODIATRIST

AHMED, AISHA
Provider ID: 417101
Provider Gender: Female
License number: DPM5369
NPI: 1316326382
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4:30PM, SA 9AM-5PM

BROWN, JAMES F
Provider ID: 206046
Provider Gender: Male
License number: DPM4434
NPI: 1073513610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax:
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM

BROWN, JAMES F
Provider ID: 233597

Provider Gender: Male
License number: DPM4434
NPI: 1073513610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax:
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-2PM

JUAREZ, LETICIA J
Provider ID: 206360
Provider Gender: Female
License number: DPM5661
NPI: 1508393778
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

<i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM MILLER, GLENN A <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Male <i>License number:</i> DPM3584 <i>NPI:</i> 1164457966 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> (619) 269-0053 <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM MILLER, GLENN A <i>Provider ID:</i> 206362 <i>Provider Gender:</i> Male <i>License number:</i> DPM3584 <i>NPI:</i> 1164457966 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No	FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> (619) 685-8317 <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM SCHNEIDER, SARAH A <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> DPM4819 <i>NPI:</i> 1326282237 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM	SCHNEIDER, SARAH A <i>Provider ID:</i> 206360 <i>Provider Gender:</i> Female <i>License number:</i> DPM4819 <i>NPI:</i> 1326282237 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM SCHNEIDER, SARAH A <i>Provider ID:</i> 402851 <i>Provider Gender:</i> Female <i>License number:</i> DPM4819 <i>NPI:</i> 1326282237 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

SCHNEIDER, SARAH A

Provider ID: 417429

Provider Gender: Female

License number: DPM4819

NPI: 1326282237

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY # 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2525

Fax:

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

SHIN, HENRY J

Provider ID: 206353

Provider Gender: Male

License number: DPM4180

NPI: 1780775379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Sharp Chula
Vista Med Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

PREVENTATIVE MEDICINE GENERAL

HILL, LINDA L

Provider ID: 206046

Provider Gender: Female

License number: G41532

NPI: 1467434811

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Board Certified Specialty: No
IHP-SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

Phone: (858) 279-0925

Fax:

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

HILL, LINDA L

Provider ID: 482070

Provider Gender: Female

License number: G41532

NPI: 1467434811

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Board Certified Specialty: No

IHP-SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax:

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
W

Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-8:30PM, SA
9AM-4PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

RISSER, JOSEPH A <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Male <i>License number:</i> G70886 <i>NPI:</i> 1952386765 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> Yes IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> (858) 279-0377 <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚭ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM	<i>Phone:</i> (858) 810-8700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 810-8700 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚭ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M,W-F 8:30AM-5:30PM, TU 8:30AM-8:30PM, SA 9AM-4PM	9AM-5PM RADIOLOGY DIAGNOSTIC X-RAY CLINE, DAVID W <i>Provider ID:</i> 185268 <i>Provider Gender:</i> Male <i>License number:</i> G87837 <i>NPI:</i> 1922162015 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 <i>Phone:</i> (619) 255-9155 <i>Fax:</i> <i>After Hours Phone:</i> (619) 255-9155 <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚭ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
RISSER, JOSEPH A <i>Provider ID:</i> 482070 <i>Provider Gender:</i> Male <i>License number:</i> G70886 <i>NPI:</i> 1952386765 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307	ROMERO, CAMILA X <i>Provider ID:</i> 206046 <i>Provider Gender:</i> Female <i>License number:</i> A93812 <i>NPI:</i> 1508912130 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Mary Birch Hosp For Women And Newborns <i>Board Certified Specialty:</i> No IHP-SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 <i>Phone:</i> (858) 279-0925 <i>Fax:</i> (858) 279-0377 <i>After Hours Phone:</i> (858) 279-0925 <i>Website:</i> www.sdfamilycare.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚭ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-F 8:30AM-5:30PM, SA	REGISTERED PHYSICAL THERAPIST AGASHE, NEELAM <i>Provider ID:</i> 206353 <i>Provider Gender:</i> Female <i>License number:</i> PT291539 <i>NPI:</i> 1689027955 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

BLOCKER, NIRIT S
Provider ID: 206353
Provider Gender: Female
License number: PT30272
NPI: 1457689309
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R,

T, ME
Hours: M-SA 9AM-5PM
BLOCKER, NIRIT S
Provider ID: 206360
Provider Gender: Female
License number: PT30272
NPI: 1457689309
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
CONCORS, ANDREW L
Provider ID: 417937
Provider Gender: Male
License number: PT12930
NPI: 1578706743
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
CUMMINGS, GEORGE P
Provider ID: 206353
Provider Gender: Male
License number: PT295173
NPI: 1497236384
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
CUMMINGS, GEORGE P
Provider ID: 417937

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: PT295173
NPI: 1497236384
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

DAHMS, MADELYNN

Provider ID: 206360
Provider Gender: Female
License number: PT295463
NPI: 1245712702
Provider English Spoken: Yes
Provider Language(s) Spoken: Sign Language
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM

FIELDING, JOSEPH S

Provider ID: 417937
Provider Gender: Male
License number: PT40975
NPI: 1235577560
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

FOREYT, JANE K

Provider ID: 206353
Provider Gender: Female
License number: PT295063

NPI: 1487066346
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License number: PT292613
NPI: 1003354895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM	MIGNEA, DAVID S Provider ID: 206353 Provider Gender: Male License number: PT293536 NPI: 1043736879 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2400 Fax: After Hours Phone: (619) 515-2400 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM
IRIZARRY, NICOLE M Provider ID: 206360 Provider Gender: Female License number: PT33914 NPI: 1003088063 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: ME Hours: M-SA 9AM-5PM	MAHONEY, KAITLYN Provider ID: 417937 Provider Gender: Female License number: PT296559 NPI: 1114583176 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2545 Fax: After Hours Phone: (619) 515-2545 Website: www.fhcsd.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM	MIGNEA, DAVID S Provider ID: 417937 Provider Gender: Male License number: PT293536 NPI: 1043736879 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143
LEAVITT, IAN R Provider ID: 206353 Provider Gender: Male License number: PT291088 NPI: 1275993560 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No FAMILY HEALTH CENTERS OF		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

REBELLO, MELANIE

Provider ID: 417937

Provider Gender: Female

License number: PT297682

NPI: 1578922795

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

REYES, CARMEN R

Provider ID: 206353

Provider Gender: Female

License number: PT40285

NPI: 1639503725

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

SCHMIDT, BRYAN J

Provider ID: 417937

Provider Gender: Male

License number: PT28061

NPI: 1780685032

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2545

Fax:

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM

VAN DYKE, JASON P

Provider ID: 206353

Provider Gender: Male

License number: PT25155

NPI: 1487658720

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

RHEUMATOLOGY

HUYNH, DOQUYEN H

Provider ID: 417937

Provider Gender: Female

License number: A110198

NPI: 1619135241

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM

OGANDO, SHEENA M

Provider ID: 206363
Provider Gender: Female
License number: A142743
NPI: 1649564295
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: John Muir Medical Center Walnut Creek Campus
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM

REDDY, DANA A

Provider ID: 206363
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:

After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

REDDY, DANA A

Provider ID: 403583
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-ST VINCENT DE PAUL VILLA
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500

Fax:
After Hours Phone: (619) 233-8500
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 9AM-5PM

SPEECH PATHOLOGIST

MANCILLAS, ANYA K

Provider ID: 206360
Provider Gender: Female
License number: SP31261
NPI: 1528698057
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM

WILLIAMS, JESSICA D
Provider ID: 206360
Provider Gender: Female
License number: SP27677
NPI: 1932680006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME

Hours: M-SA 9AM-5PM

SAN MARCOS

CERTIFIED NURSE PRACTITIONER

BALLEZA, SASHA D
Provider ID: 206426
Provider Gender: Female
License number: NP95001230
NPI: 1750706263
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

BINETTE, DONYA L
Provider ID: 206426
Provider Gender: Female
License number: NP95001653
NPI: 1427325166
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
IHP-TRUECARE
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

BOROWIEC, MARIA M
Provider ID: 206426
Provider Gender: Female
License number: NP95004808
NPI: 1285183442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

DOAN, CHINH N

Provider ID: 206426
Provider Gender: Female
License number: NP18874
NPI: 1083845069
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

FREEMAN, WANDA

Provider ID: 206426
Provider Gender: Female
License number: NP95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

HEDRICK, CINDI R

Provider ID: 206426
Provider Gender: Female
License number: NP95012162
NPI: 1477010445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

HENLEY, MEARA E

Provider ID: 206426
Provider Gender: Female
License number: NP95002545

NPI: 1538319645
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

KOUSARI, JHALEH

Provider ID: 206426
Provider Gender: Female
License number: NP20893
NPI: 1811262405
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:

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C. Directorio de proveedores de atención primaria

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

LEWIS, SARAH

Provider ID: 206426
Provider Gender: Female
License number: NP22697
NPI: 1437497963
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-TRUECARE
Board Certified Specialty: No
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

MACIAS, ALISSA M

Provider ID: 206426
Provider Gender: Female
License number: NP21368
NPI: 1952658445
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-TRUECARE
Board Certified Specialty: No

IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

MARTINEZ, ILIANA A

Provider ID: 206426
Provider Gender: Female
License number: NP95018018
NPI: 1336711753
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-TRUECARE
Board Certified Specialty: No
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

PRIETO, ALEJANDRA J

Provider ID: 206426
Provider Gender: Female
License number: NP95004873
NPI: 1699222620
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-TRUECARE
Board Certified Specialty: No
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

SIU, HANAGRY

Provider ID: 206426
Provider Gender: Female
License number: NP23240
NPI: 1639502297
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: IHP-TRUECARE
Board Certified Specialty: No
150 VALPRED RD
SAN MARCOS, CA 92069-2973

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C. Directorio de proveedores de atención primaria

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)
736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

TRUMAN, LAURA L

Provider ID: 206426

Provider Gender: Female

License number: NP19860

NPI: 1376840231

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

TURNER, DAWN M

Provider ID: 206426

Provider Gender: Female

License number: NP22586

NPI: 1386988368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

CERTIFIED REGISTERED NURSE MIDWIFE

ALSTON, VICKIE S

Provider ID: 206426

Provider Gender: Female

License number: NM993

NPI: 1932209905

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

BALLANTINE, KATHERINE A

Provider ID: 206426

Provider Gender: Female

License number: NP95005707

NPI: 1538516240

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihapsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

BALLANTINE, KATHERINE A

Provider ID: 206426

Provider Gender: Female

License number: RN95086028

NPI: 1538516240

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

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C. Directorio de proveedores de atención primaria

IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

BALLANTINE, KATHERINE A

Provider ID: 206426
Provider Gender: Female
License number: NM235794
NPI: 1538516240
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

GEORGESON, TANYA M

Provider ID: 206426
Provider Gender: Female
License number: NM235844
NPI: 1407287469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

KELLY, KATHERINE M

Provider ID: 206426
Provider Gender: Female
License number: NMW235997
NPI: 1801134275
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

VENOR, KRISTEN A

Provider ID: 206426
Provider Gender: Female
License number: NM235688
NPI: 1811391261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

CHIROPRACTOR

LOVERN, JENNIFER K

Provider ID: 206426
Provider Gender: Female
License number: DC29074
NPI: 1235469396
Provider English Spoken: Yes
Provider Language(s) Spoken:

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C. Directorio de proveedores de atención primaria

Italian
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

FAMILY PRACTICE

MATIAS, JULIE M
Provider ID: 206426
Provider Gender: Female
License number: 20A15159
NPI: 1083094510
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

NATH, DEVARSHI
Provider ID: 206426
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bengali
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

SAFI, ROOZCHEHR
Provider ID: 206426
Provider Gender: Female
License number: A116562
NPI: 1659563641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No

IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

WALKER, SHAYNA T
Provider ID: 206426
Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM

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C. Directorio de proveedores de atención primaria

WILLIE, KADEN G

Provider ID: 206426
Provider Gender: Male
License number: 20A17306
NPI: 1790133767
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

FQHC

TRUECARE,

Provider ID: 206426
Provider Gender:
License number: 080000167
NPI: 1245246917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 206426
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

PONIACHIK, SAMUEL I

Provider ID: 206426

Provider Gender: Male
License number: G74757
NPI: 1467485078
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

WITCZAK, IZABELA

Provider ID: 206426
Provider Gender: Female
License number: A71311
NPI: 1184735201
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Board Certified Specialty: No
IHP-TRUECARE
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

License number: 20A7358

NPI: 1639170459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Sharp Memorial
Hospital

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax: (760) 758-7057

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CAMPBELL, LETICIA J

Provider ID: 206426

Provider Gender: Female

License number: A131042

NPI: 1508124868

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Palomar Medical
Center

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6767

Fax:

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License number: A97181

NPI: 1154477628

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 753-7259

After Hours Phone: (760)

736-6700

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

POUNTNEY, MARLENE E

Provider ID: 206426

Provider Gender: Female

License number: A93248

NPI: 1174703680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-TRUECARE

150 VALPRED RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax:

After Hours Phone: (760)

736-6700

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 8AM-5PM

MAZAREI, RAHELE

Provider ID: 206426

Provider Gender: Female

SCHWEIKERT, SUZANNE M

Provider ID: 206426

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C. Directorio de proveedores de atención primaria

Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760) 736-6700
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

MALHOTRA, ARATI

Provider ID: 206426
Provider Gender: Female
License number: A63903
NPI: 1215135306
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

Provider ID: 50425
Provider Gender: Female
License number: G26892
NPI: 1619973666
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 1582 W SAN MARCOS BLVD STE 203
 SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760) 744-6710
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

PEDIATRICS

AUSTIN, DAVID A

Provider ID: 206426
Provider Gender: Male
License number: A92271
NPI: 1265434096
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973

After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

MONAHAN, CAROLYN O

POSADAS, EMERITO D

Provider ID: 206426
Provider Gender: Male
License number: A48980
NPI: 1720093198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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C. Directorio de proveedores de atención primaria

SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

QUINTERO, CAROLYN S

Provider ID: 206426
Provider Gender: Female
License number: G77053
NPI: 1023033156
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

ROSENFELD, GINA

Provider ID: 36393

Provider Gender: Female
License number: G76842
NPI: 1235135286
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1582 W SAN MARCOS BLVD STE 203
 SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760) 744-6710
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

SEBIANE, MARIA G

Provider ID: 206426
Provider Gender: Female
License number: G71182
NPI: 1740295229
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Medical Center
Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD

SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM

SOCHA, TRACI E

Provider ID: 428861
Provider Gender: Female
License number: 20A7862
NPI: 1669478616
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1582 W SAN MARCOS BLVD STE 203
 SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760) 744-6710
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

ZACHRY, ALISON D <i>Provider ID:</i> 206426 <i>Provider Gender:</i> Female <i>License number:</i> A131678 <i>NPI:</i> 1922402858 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Tri City Medical Ctr <i>Board Certified Specialty:</i> No IHP-TRUECARE 150 VALPRED RD SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚠ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 8AM-5PM	SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚠ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 8AM-5PM BLAKESPEAR, JEREMY D <i>Provider ID:</i> 206426 <i>Provider Gender:</i> Male <i>License number:</i> PA19825 <i>NPI:</i> 1750474177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 150 VALPRED RD SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚠ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 8AM-5PM	<i>License number:</i> PA22667 <i>NPI:</i> 1174964001 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital <i>Board Certified Specialty:</i> No IHP-TRUECARE 150 VALPRED RD SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚠ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 8AM-5PM
PHYSICIANS ASSISTANT BERNARDO, RACHELLE A <i>Provider ID:</i> 206426 <i>Provider Gender:</i> Female <i>License number:</i> PA17718 <i>NPI:</i> 1821237678 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 150 VALPRED RD	<i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ⚠ <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 8AM-5PM CHISWICK, GARY R <i>Provider ID:</i> 206426 <i>Provider Gender:</i> Male	CRUZ, ASHLEY D <i>Provider ID:</i> 206426 <i>Provider Gender:</i> Female <i>License number:</i> PA22997 <i>NPI:</i> 1063851814 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-TRUECARE 150 VALPRED RD SAN MARCOS, CA 92069-2973 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes

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C. Directorio de proveedores de atención primaria

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

KOSEL, MATTHEW J

Provider ID: 206426
 Provider Gender: Male
 License number: PA17101
 NPI: 1316947302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

LEON, FLOR M

Provider ID: 206426
 Provider Gender: Female
 License number: PA53788
 NPI: 1902358237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE

150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

PADDOCK, DIANA L

Provider ID: 206426
 Provider Gender: Female
 License number: PA52175
 NPI: 1447657804
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

RUSSO, KRISTA L

Provider ID: 206426
 Provider Gender: Female
 License number: PA53036
 NPI: 1922471192
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, W
 Hours: M-SA 8AM-5PM

SCHALCK, KRISTEN S

Provider ID: 206426
 Provider Gender: Female
 License number: PA14416
 NPI: 1760587919
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760)
 736-6767

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 8AM-5PM

SPENCE, JAMIE N

Provider ID: 206426
 Provider Gender: Female
 License number: PA21723
 NPI: 1518133032
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767

Fax:
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 8AM-5PM

TAHRIRI, BAHAREH

Provider ID: 206426
 Provider Gender: Female
 License number: PA51867
 NPI: 1295147387
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-TRUECARE
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 8AM-5PM

SAN YSIDRO

CARDIOVASCULAR DISEASE

PONCE, SONIA G

Provider ID: 206292
 Provider Gender: Female
 License number: A145008
 NPI: 1164659033
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CERTIFIED NURSE PRACTITIONER

CELIZ, ADRIANA G

Provider ID: 227469
 Provider Gender: Female
 License number: NP95004315
 NPI: 1972956514
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

CHING, LEYDA B

Provider ID: 227469
Provider Gender: Female
License number: NP20123
NPI: 1508098294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 600-4867
Fax:
After Hours Phone: (619)
 600-4867
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

GARCIA, TEDAYSHIA P

Provider ID: 206292
Provider Gender: Female
License number: NP95003355
NPI: 1659730778
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

GUADARRAMA, IGNACIO

Provider ID: 227469
Provider Gender: Male
License number: NP95003671
NPI: 1821331174
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM

IBARRA, MARTHA A

Provider ID: 206292

Provider Gender: Female
License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

IBARRA, MARTHA A

Provider ID: 227469
Provider Gender: Female
License number: NP12112
NPI: 1114957289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
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 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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 Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

SANCHEZ, MYRNA A

Provider ID: 227469
Provider Gender: Female
License number: NP95003721
NPI: 1548614506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female

License number: NP95001960
NPI: 1669865960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM

CHIROPRACTOR

KELCHNER, MATTHEW O

Provider ID: 206292
Provider Gender: Male
License number: DC22733
NPI: 1174656755
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

OCHOA, RAUL O

Provider ID: 206292
Provider Gender: Male
License number: DC33693
NPI: 1518401827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

FAMILY PRACTICE

ALGHAMDI, ASMA M

Provider ID: 227469
Provider Gender: Female
License number: A167529

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C. Directorio de proveedores de atención primaria

NPI: 1316310840
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM

ALVAREZ-ESTRADA, MIGUEL
 Provider ID: 206292
 Provider Gender: Male
 License number: A157505
 NPI: 1588197826
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

ALVAREZ-ESTRADA, MIGUEL
 Provider ID: 227411
 Provider Gender: Male
 License number: A157505
 NPI: 1588197826
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 205-1967
 Fax:
 After Hours Phone: (619)
 205-1967
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

BAUM, PETER M
 Provider ID: 206292
 Provider Gender: Male
 License number: 20A14949
 NPI: 1174919971
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619)
 428-4463
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

BORSAN, COSMIN
 Provider ID: 206292
 Provider Gender: Male
 License number: 20A17643
 NPI: 1679060255
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Romanian
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:

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C. Directorio de proveedores de atención primaria

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

CARRIEDO CENICEROS, MARIA T

Provider ID: 206292
Provider Gender: Female
License number: A78373
NPI: 1295746618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

CASTILLO, STEPHANIE

Provider ID: 206292
Provider Gender: Female
License number: A159673
NPI: 1902330723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

CEVALLOS, JAMES E

Provider ID: 206292
Provider Gender: Male
License number: A55469
NPI: 1720181829
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619)
662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

CORONADO, MYRNA L

Provider ID: 206292
Provider Gender: Female
License number: A112627
NPI: 1710147566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 428-4463
Fax:
After Hours Phone: (619)
428-4463
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

CORONADO, MYRNA L

Provider ID: 227411
Provider Gender: Female
License number: A112627
NPI: 1710147566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8:30AM-5PM, SA 9AM-5PM	8:30AM-2PM FELLMAN, ANNA T Provider ID: 206292 Provider Gender: Female License number: A138371 NPI: 1730590290 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Kaweah Delta District Hosp Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM	CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM
ESTRADA, JOHANNA A Provider ID: 206292 Provider Gender: Female License number: A127188 NPI: 1255698155 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Green Hospital, Scripps Memorial Hospital Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5:30PM, SA	8:30AM-2PM HEINRICI, ALEKA D Provider ID: 206292 Provider Gender: Female License number: A125329 NPI: 1780979120 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: John Muir Medical Center Walnut Creek Campus Board Certified Specialty: No IHP-SAN YSIDRO HEALTH	HENDRIX, JEFFERSON C Provider ID: 227469 Provider Gender: Male License number: A32571 NPI: 1235142738 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

HERNANDEZ, RALPH C <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Male <i>License number:</i> C42207 <i>NPI:</i> 1285782151 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 8:30AM-2PM	<i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	<i>License number:</i> A164201 <i>NPI:</i> 1417480948 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> St Elizabeth Hosp <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> (619) 205-6341 <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 8:30AM-2PM
HERNANDEZ, RALPH C <i>Provider ID:</i> 227469 <i>Provider Gender:</i> Male <i>License number:</i> C42207 <i>NPI:</i> 1285782151 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322	LARA, LESLEY <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Female <i>License number:</i> A173435 <i>NPI:</i> 1184112682 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 8:30AM-2PM	LEE, JOSEPH Y <i>Provider ID:</i> 227469 <i>Provider Gender:</i> Male <i>License number:</i> A164201 <i>NPI:</i> 1417480948 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> St Elizabeth Hosp <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100
	LEE, JOSEPH Y <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Male	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

LEPEZ, DAVID

Provider ID: 206292

Provider Gender: Male

License number: A130348

NPI: 1205196029

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

NAVARRO, VANESSA M

Provider ID: 227469

Provider Gender: Female

License number: A113624

NPI: 1952563421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Chula Vista Med Ctr

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

NGUYEN, CARIE C

Provider ID: 206292

Provider Gender: Female

License number: A106103

NPI: 1174781132

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

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Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License number: 20A12653

NPI: 1508121674

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

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Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

RAJAPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License number: A145480

NPI: 1508286709

Provider English Spoken: Yes

Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Farsi
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

ROSENBAUM, HERBERT B
Provider ID: 206292
Provider Gender: Male
License number: A169694
NPI: 1922532712
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SALEM, RAMSEY A
Provider ID: 206292
Provider Gender: Male
License number: A158364
NPI: 1245401298
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SNYDER, CHRISTOPHER L
Provider ID: 206292
Provider Gender: Male
License number: 20A7502
NPI: 1922041235
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pih Hospital - Downey, John F Kennedy

Memorial Hosp, Cedars Sinai Medical Center
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

TALAVERA, GREGORY A
Provider ID: 206292
Provider Gender: Male
License number: A40061
NPI: 1740337161
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

No Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM TREJO, RAUL Provider ID: 206292 Provider Gender: Male License number: A77936 NPI: 1174534184 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM VELASQUEZ, SHARON F Provider ID: 206292 Provider Gender: Female License number: A71304 NPI: 1972732584 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy	Hospital Chula Vista Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM FQHC SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, Provider ID: 227411 Provider Gender: License number: NPI: 1952364747 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: IHP-SAN YSIDRO HEALTH CENTER 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes	Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8:30AM-5PM, SA 9AM-5PM SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, Provider ID: 206292 Provider Gender: License number: NPI: 1952364747 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Website: www.ihpsocal.org Email: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, Provider ID: 227469 Provider Gender: License number: NPI: 1801438239 Provider English Spoken: Yes Provider Language(s) Spoken:
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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

GENERAL PRACTICE

TEJEDA, FRANCISCO J
Provider ID: 206292
Provider Gender: Male
License number: A66885
NPI: 1407940075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

GYNECOLOGY

CALDERON, JORGE A
Provider ID: 206292
Provider Gender: Male
License number: A40480
NPI: 1407800881
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Lompoc Valley Medical Center
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

INFECTIOUS DISEASE

PARK, DANIEL
Provider ID: 206292

Provider Gender: Male
License number: A99433
NPI: 1538371844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

INTERNAL MEDICINE GERIATRIC MEDICINE

CHAU, DIANE L
Provider ID: 206292
Provider Gender: Female
License number: A65089
NPI: 1780609834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

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C. Directorio de proveedores de atención primaria

Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619) 428-4463
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CHAU, DIANE L

Provider ID: 227469
 Provider Gender: Female
 License number: A65089
 NPI: 1780609834
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE L

Provider ID: 206292
 Provider Gender: Female
 License number: A101017
 NPI: 1073650339
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CARPENTER, ROBERT J

Provider ID: 206292
 Provider Gender: Male
 License number: 20A10964
 NPI: 1356343040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

CHEN, TSUH YIN

Provider ID: 206292
 Provider Gender: Female
 License number: C55563
 NPI: 1093803520
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
 Website: www.ihapsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CHOW, MAN HUNG J <i>Provider ID:</i> 227469 <i>Provider Gender:</i> Female <i>License number:</i> G66745 <i>NPI:</i> 1225149115 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM	IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 8:30AM-2PM	8:30AM-2PM DILLON, BENEDICT S <i>Provider ID:</i> 227411 <i>Provider Gender:</i> Male <i>License number:</i> A111118 <i>NPI:</i> 1710142708 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 4050 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8:30AM-5PM, SA 9AM-5PM
DE LA ROSA, JOSE B <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Male <i>License number:</i> A49267 <i>NPI:</i> 1689646572 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No	DIAZ-GONZALEZ, VICENTE <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Male <i>License number:</i> A84160 <i>NPI:</i> 1790745776 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH CENTER 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.ihpsocal.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA	KAUFER, DAVID I <i>Provider ID:</i> 206292 <i>Provider Gender:</i> Male <i>License number:</i> G80107 <i>NPI:</i> 1710082789 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Board Certified Specialty:</i> No IHP-SAN YSIDRO HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

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 4004 BEYER BLVD
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 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

POAST, JENNIFER L
 Provider ID: 206292
 Provider Gender: Female
 License number: 20A8245
 NPI: 1164435681
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 428-4463
 Fax:
 After Hours Phone: (619) 428-4463
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SALERNO, MARIANA V
 Provider ID: 206292
 Provider Gender: Female
 License number: A131021
 NPI: 1598921645
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Providence St. Joseph Hospital Eureka
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SCHNEIDER-MUNOZ, MARGARITA P
 Provider ID: 206292
 Provider Gender: Female
 License number: G81461
 NPI: 1821299520
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SHEIKH MOHAMED, AMIRA A
 Provider ID: 227469
 Provider Gender: Female
 License number: A153975
 NPI: 1831583079
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: W
 Hours: M-F 8AM-5PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

9AM-5PM

SY, RAMON S

Provider ID: 227469

Provider Gender: Male

License number: A51843

NPI: 1982617403

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

VELAZQUEZ CAMARENA, MARIA D

Provider ID: 206292

Provider Gender: Female

License number: A56153

NPI: 1518965714

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License number: 20A12555

NPI: 1205126505

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 206292

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA K

Provider ID: 227411

Provider Gender: Female

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: C158543
 NPI: 1912159674
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Scripps Memorial
 Hospital, Scripps Green Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM

CARR, MIANDA C

Provider ID: 206292
 Provider Gender: Female
 License number: A104660
 NPI: 1083815823
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: St Josephs
 Med Center Of Stockton, Scripps
 Mercy Hospital Chula Vista,
 Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH

CENTER
 4004 BEYER BLVD
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 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

CARSON, LATISA S

Provider ID: 206292
 Provider Gender: Female
 License number: A72235
 NPI: 1245229129
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER

4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

DANESHMAND, SHAHRAM S

Provider ID: 206292
 Provider Gender: Male
 License number: A63844
 NPI: 1891867412
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital, Tri
 City Medical Ctr, Sharp Mary
 Birch Hosp For Women And
 Newborns, Scripps Green
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100

Fax:
 After Hours Phone: (619)
 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5:30PM, SA
 8:30AM-2PM

DANESHMAND, SHAHRAM S

Provider ID: 227411
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

License number: A63844
NPI: 1891867412
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

DINH, MY T

Provider ID: 206292
Provider Gender: Female
License number: 20A9907
NPI: 1316146996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

DOLINSKY, BRAD M

Provider ID: 227411
Provider Gender: Male
License number: C149818
NPI: 1942480199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

FAKSH, ARIJ

Provider ID: 227411
Provider Gender: Female
License number: 20A14222
NPI: 1912166737
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Scripps Mercy Hospital, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

GOLDSTEIN, EDWARD M

Provider ID: 227411

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C. Directorio de proveedores de atención primaria

Provider Gender: Male
License number: G20087
NPI: 1982617494
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

JENKINS, ENCHANTA L

Provider ID: 227411
Provider Gender: Female
License number: C143625
NPI: 1285604702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

JIBRIL, DEANAH A

Provider ID: 206292
Provider Gender: Female
License number: 20A17489
NPI: 1134183114
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Riverside Community Hosp
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

LAI, JASMINE

Provider ID: 206292
Provider Gender: Female
License number: A113482
NPI: 1265661177
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD
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Phone: (619) 662-4100

Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

LAI, JASMINE

Provider ID: 227411
Provider Gender: Female
License number: A113482
NPI: 1265661177
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

MAJERSKI GONZALEZ, MANDY M

Provider ID: 206292
Provider Gender: Female
License number: A113914
NPI: 1982812392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

MAJERSKI GONZALEZ, MANDY M

Provider ID: 227411
Provider Gender: Female
License number: A113914
NPI: 1982812392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

MENDEZ, DIEGO

Provider ID: 227411
Provider Gender: Male
License number: A47906
NPI: 1437181922
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Mercy General Hospital, Scripps Mercy Hospital Chula Vista, Bakersfield Memorial Hosp, Sharp Memorial Hospital, San Joaquin Comm Hosp, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:

After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

SEFA-BOAKYE, KOFI D

Provider ID: 206292
Provider Gender: Male
License number: G59670
NPI: 1902993660
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula

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C. Directorio de proveedores de atención primaria

Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr,
Scripps Mercy Hospital Chula
Vista

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

SHORT, ABIAD E C

Provider ID: 206292

Provider Gender: Male

License number: A114893

NPI: 1750559589

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH
CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8AM-5:30PM, SA
8:30AM-2PM

STARIKOV, ROMAN S

Provider ID: 227411

Provider Gender: Male

License number: C160626

NPI: 1396966537

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas, Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8:30AM-5PM, SA

9AM-5PM

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 227469

Provider Gender: Female

License number: A40473

NPI: 1023061314

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Faroese, Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Sharp
Memorial Hospital, Ucsd Medical
Ctr, Sharp Chula Vista Med Ctr,

Grossmont Hospital

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

SKAF, AYHAM R

Provider ID: 227469

Provider Gender: Male

License number: A120584

NPI: 1285888628

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

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C. Directorio de proveedores de atención primaria

Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PEDIATRICS

ACEVEDO, SUSANA
Provider ID: 227411
Provider Gender: Female
License number: A74960
NPI: 1801971569
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

ARGOUD, GEORGES E
Provider ID: 206292
Provider Gender: Male
License number: A21814
NPI: 1215904461
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*

Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

BARBADILLO, FERDINAND F
Provider ID: 206292
Provider Gender: Male

License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

BARBADILLO, FERDINAND F
Provider ID: 227411
Provider Gender: Male
License number: A49307
NPI: 1982662193
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

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C. Directorio de proveedores de atención primaria

Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

CABARLO, JEHRIB M

Provider ID: 227411
 Provider Gender: Male
 License number: 20A8516
 NPI: 1770661340
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

CHAIT LLAMAS, LWBBA G

Provider ID: 227411
 Provider Gender: Female
 License number: A138938
 NPI: 1134567530
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Pioneers Memorial Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

FUJII, CINDY M

Provider ID: 227411
 Provider Gender: Female
 License number: G52183
 NPI: 1871664821
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM

GHAHREMANI, SIMIN M

Provider ID: 206292
 Provider Gender: Female
 License number: C51110
 NPI: 1508904657
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website: www.ihpsocal.org
 Email:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

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C. Directorio de proveedores de atención primaria

HERMAN, ANDREA M

Provider ID: 227411
Provider Gender: Female
License number: A72721
NPI: 1518970037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

HURST, MICHAEL D

Provider ID: 206292
Provider Gender: Male
License number: 20A8081
NPI: 1205893104
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sutter Tracy Community Hosp, Scripps Memorial Hospital

Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

PIANSAY, MARIA CORAZON M

Provider ID: 206292
Provider Gender: Female
License number: A93785
NPI: 1669680351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SAHMS, TIMOTHY D

Provider ID: 206292
Provider Gender: Male
License number: G51462
NPI: 1780697276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SAHMS, TIMOTHY D

Provider ID: 227411
Provider Gender: Male
License number: G51462
NPI: 1780697276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

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C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

SHAHIDYAZDANI, TINA

Provider ID: 227411
Provider Gender: Female
License number: A94813
NPI: 1891924858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA

9AM-5PM

SULLIVAN, ELISSA K

Provider ID: 227411
Provider Gender: Female
License number: A169577
NPI: 1790216422
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

TAYLOR, TASHA K

Provider ID: 227411
Provider Gender: Female
License number: A82187
NPI: 1528144433
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 4050 BEYER BLVD

SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA N

Provider ID: 227469
Provider Gender: Female
License number: PA58672
NPI: 1013516996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
 3364 BEYER BLVD
 SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

KAMOTO, LYNN T

Provider ID: 206292
Provider Gender: Female
License number: PA17162
NPI: 1447326459
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SHARPE, NORMA A

Provider ID: 206292
Provider Gender: Female
License number: PA20490
NPI: 1619100237
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

SUNA SITTO, MOHEEN

Provider ID: 227469
Provider Gender: Female
License number: PA22855
NPI: 1497196729
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 600-4867
Fax:
After Hours Phone: (619) 600-4867
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM

PODIATRIST

MANCHEL, BRUCE A

Provider ID: 206292
Provider Gender: Male
License number: DPM2930
NPI: 1790890788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM

MANCHEL, BRUCE A

Provider ID: 227469
Provider Gender: Male
License number: DPM2930
NPI: 1790890788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

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C. Directorio de proveedores de atención primaria

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

REGISTERED PHYSICAL THERAPIST

DESOUSA, MICHELLE M

Provider ID: 227469

Provider Gender: Female

License number: PT294313

NPI: 1912443649

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH
CENTER

3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

SURGERY GENERAL

OKWUOSA, CHRIS U

Provider ID: 206292

Provider Gender: Male

License number: A170738

NPI: 1114336260

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Providence St

Mary Medical Center

Board Certified Specialty: No

IHP-SAN YSIDRO HEALTH

CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website: www.ihpsocal.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

SANTEE

FQHC

SAN YSIDRO HEALTH

SANTEE FAMILY MEDICINE,

Provider ID: 520609

Provider Gender:

License number: 550003575

NPI: 1376184911

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-SAN YSIDRO HEALTH

CENTER

120 TOWN CENTER PKWY

SANTEE, CA 92071-5801

Phone: (619) 445-6200

Fax: (619) 873-3476

After Hours Phone: (619)

445-6200

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E

Hours: M-SA 9AM-5PM

PEDIATRICS

FINK, REBECCA

Provider ID: 502786

Provider Gender: Female

License number: A159345

NPI: 1659725562

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

9600 CUYAMACA ST STE 101

SANTEE, CA 92071-2692

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619)

749-2150

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

MANGINE, REGINA M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 366456
Provider Gender: Female
License number: A101261
NPI: 1417177577
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 9600 CUYAMACA ST STE 101
 SANTEE, CA 92071-2692
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619)
 749-2150
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY S
Provider ID: 206361
Provider Gender: Female
License number: NP10943
NPI: 1285772392
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:

Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

FAMILY PRACTICE

BACHARACH, REBECCA E
Provider ID: 206361
Provider Gender: Female
License number: 20A15459
NPI: 1225442643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: ME
Hours: M-SA 9AM-5PM

CARDONES, ARTHUR J
Provider ID: 206361
Provider Gender: Male
License number: A55932
NPI: 1962436451
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: ME
Hours: M-SA 9AM-5PM

CONSTANTINO, STEPHANIE L
Provider ID: 206361
Provider Gender: Female
License number: A149063
NPI: 1366824971
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital
Board Certified Specialty: No

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ROSE, PATRICIA A

Provider ID: 206361

Provider Gender: Female

License number: A76059

NPI: 1588677314

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SHAH, SAGAR K

Provider ID: 206361

Provider Gender: Male

License number: A171687

NPI: 1164780052

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

FQHC

GROSSMONT SPRING

VALLEY FAMILY HLTH CTRS INC,

Provider ID: 206361

Provider Gender:

License number:

NPI: 1508801069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax: (619) 462-5584

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

INTERNAL MEDICINE

SHAHZAD, AHMAD

Provider ID: 206361

Provider Gender: Male

License number: C169910

NPI: 1982983557

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Uc Davis

Medical Ctr

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)

515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

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C. Directorio de proveedores de atención primaria

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 206361
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

BUECHNER, CHARLENE A

Provider ID: 206361
Provider Gender: Female
License number: A68463
NPI: 1376663831
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Sharp Mary
Birch Hosp For Women And
Newborns
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
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After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CAMPBELL, ELIZABETH C

Provider ID: 206361
Provider Gender: Female
License number: 20A6763
NPI: 1932147329
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Palomar Medical Center, Pomerado Hospital, Rady Childrens Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD

SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

CARTER, KHALIL J

Provider ID: 206361
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM

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C. Directorio de proveedores de atención primaria

CERVANTES, SANDRA M <i>Provider ID:</i> 206361 <i>Provider Gender:</i> Female <i>License number:</i> A118095 <i>NPI:</i> 1073701041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM	8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM FOLCH TORRES-AGUIAR, BEATRIZ M <i>Provider ID:</i> 206361 <i>Provider Gender:</i> Female <i>License number:</i> A148014 <i>NPI:</i> 1457794752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> ME	<i>Hours:</i> M-SA 9AM-5PM HANLEY, LAUREN E <i>Provider ID:</i> 206361 <i>Provider Gender:</i> Female <i>License number:</i> C174771 <i>NPI:</i> 1053392035 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Sharp Grossmont Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM
DE MIK, TRAVIS J <i>Provider ID:</i> 206361 <i>Provider Gender:</i> Male <i>License number:</i> A108228 <i>NPI:</i> 1629277322 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital <i>Board Certified Specialty:</i> No FAMILY HEALTH CENTERS OF SAN DIEGO	8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> ME	LIPSCHITZ, LISA S <i>Provider ID:</i> 206361 <i>Provider Gender:</i> Female <i>License number:</i> A72005 <i>NPI:</i> 1649208711 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital

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C. Directorio de proveedores de atención primaria

Grossmont Hospital
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

LOEFFLER, ALLISON M

Provider ID: 206361

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 206361

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 206361

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SAPRA, SONIA V

Provider ID: 206361

Provider Gender: Female

License number: A164859

NPI: 1952751711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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C. Directorio de proveedores de atención primaria

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

SINGH, RASHMI

Provider ID: 206361

Provider Gender: Female

License number: A168236

NPI: 1679937619

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

WINESBURG, JENNIFER J

Provider ID: 206361

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital, Desert Regional Med
Ctr

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

ZIEG, ALAN J

Provider ID: 206361

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

PEDIATRICS

GONZALEZ, AMANDA R

Provider ID: 206361

Provider Gender: Female

License number: A169342

NPI: 1750745493

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

Phone: (619) 515-2555

Fax:

After Hours Phone: (619)
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Website: www.fhcsd.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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C. Directorio de proveedores de atención primaria

♿ **Accessibility:** ME
Hours: M-SA 9AM-5PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO A

Provider ID: 206361
Provider Gender: Male
License number: PA21385
NPI: 1932335080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
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Min/Max Age: None
American Sign Language (ASL):
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♿ **Accessibility:** ME
Hours: M-SA 9AM-5PM

TRAN, TU-UYEN T

Provider ID: 206361
Provider Gender: Female
License number: PA54588
NPI: 1598293748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF

SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ **Accessibility:** ME
Hours: M-SA 9AM-5PM

TURNER, ERIC M

Provider ID: 206361
Provider Gender: Male
License number: PA55067
NPI: 1669756128
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ **Accessibility:** ME
Hours: M-SA 9AM-5PM

PODIATRIST

MILLER, GLENN A

Provider ID: 206361
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Website: www.fhcsd.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ **Accessibility:** ME
Hours: M-SA 9AM-5PM

VALLEY CENTER

PEDIATRICS

CRAYCHEE, LEO C

Provider ID: 71887
Provider Gender: Male
License number: G59127
NPI: 1265432710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Childrens Hospital San Diego
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

28714 VALLEY CENTER RD
STE L

VALLEY CENTER, CA

92082-6554

Phone: (760) 749-7770

Fax: (760) 751-9988

After Hours Phone: (760)

749-7770

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

VISTA

CARDIOLOGY

DO, HULBERT N

Provider ID: 206338

Provider Gender: Male

License number: C162072

NPI: 1679733760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, T,

W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO K

Provider ID: 206338

Provider Gender: Female

License number: NP95003571

NPI:

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, T,

W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

BROMAN, GRETCHEN L

Provider ID: 206338

Provider Gender: Female

License number: NP95007885

NPI: 1922421288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, T,

W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 206338

Provider Gender: Male

License number: NP95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

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C. Directorio de proveedores de atención primaria

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T, W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

HALGEDAHL, YI T

Provider ID: 400339

Provider Gender: Male

License number: NP95006826

NPI: 1619246907

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,W-F 8AM-5PM, TU

10:30AM-7:30PM, SA 9AM-5PM

KAYE, ALYSON R

Provider ID: 206338

Provider Gender: Female

License number: NP23217

NPI: 1457668840

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 414-3892

Fax:

After Hours Phone: (760)

414-3892

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T, W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 206338

Provider Gender: Female

License number: NP95003447

NPI: 1245695006

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T, W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

KELLEHER, BRIDGET M

Provider ID: 400339

Provider Gender: Female

License number: NP95003447

NPI: 1245695006

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

MAOKHAMPHIOU, DEBBIE W

Provider ID: 206338

Provider Gender: Female

License number: NP95009149

NPI: 1275025827

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

NICHOLAS, ESTELA M

Provider ID: 206338

Provider Gender: Female

License number: NP11448

NPI: 1558384792

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (844) 308-5003

Fax:

After Hours Phone: (844)

308-5003

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

PATEMAN, CAROLYN U

Provider ID: 206338

Provider Gender: Female

License number: NP10896

NPI: 1205859444

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

SCHAEPE, RHODORA A

Provider ID: 400339

Provider Gender: Female

License number: RN410247

NPI: 1700974789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M,W-F 8AM-5PM, TU

10:30AM-7:30PM, SA 9AM-5PM

SCHAEPE, RHODORA A

Provider ID: 400339

Provider Gender: Female

License number: NP7791

NPI: 1700974789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: W Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM	8AM-5PM, SA 9AM-4PM CERTIFIED REGISTERED NURSE MIDWIFE ZAMORA-FLYR, MARIA M Provider ID: 206338 Provider Gender: Female License number: NM1634 NPI: 1194938647 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T, W, ME Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM	Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 414-3892 Fax: After Hours Phone: (760) 414-3892 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T, W, ME Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
YOUNG, JENNIFER A Provider ID: 206338 Provider Gender: Female License number: NP95003087 NPI: 1558701094 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 414-3892 Fax: After Hours Phone: (760) 414-3892 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, T, W, ME Hours: M-TH 8AM-8PM, F	CHIROPRACTOR CORTEZ, JAIME Provider ID: 206338 Provider Gender: Male License number: DC31392 NPI: 1508195348 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No	JU, NATHANIEL Provider ID: 206338 Provider Gender: Male License number: DC32054 NPI: 1972883882 Provider English Spoken: Yes Provider Language(s) Spoken: Chinese Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

JU, NATHANIEL

Provider ID: 400339
Provider Gender: Male
License number: DC32054
NPI: 1972883882
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206338
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

ESPINOSA-SILVA, YAMINAH

Provider ID: 400339
Provider Gender: Female
License number: 20A12958
NPI: 1003172016
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

FATLAND, SARAH E

Provider ID: 206338
Provider Gender: Female
License number: 20A18374
NPI: 1831354026
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

KETCHEL, CLINT

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 206338
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish, Syriac
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

KETCHEL, CLINT

Provider ID: 400339
Provider Gender: Male
License number: A135564
NPI: 1699038125
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish, Syriac
Cultural Competency: No

Hospital Affiliation: Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
134 GRAPEVINE RD VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

LAROCQUE, MICHAEL A

Provider ID: 206338
Provider Gender: Male
License number: C34614
NPI: 1306879549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

LEONARD, LISA A

Provider ID: 206338
Provider Gender: Female
License number: G79676
NPI: 1477588598
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

MERRILL-WILSON, PATRICIA

Provider ID: 206338

Provider Gender: Female

License number: 20A13157

NPI: 1427038926

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

PANICKER, CIBU

Provider ID: 206338

Provider Gender: Male

License number: A149340

NPI: 1235492760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

PUDOL, CHRISTOPHER B

Provider ID: 206338

Provider Gender: Male

License number: 20A14907

NPI: 1851386080

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri
City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

SIMATI, BETH L

Provider ID: 206338

Provider Gender: Female

License number: C156596

NPI: 1417187618

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Whittier

Hospital Medical Center, Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr

Board Certified Specialty: No

IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)

631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

SIMATI, BETH L

Provider ID: 400339

Provider Gender: Female

License number: C156596

NPI: 1417187618

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Whittier
 Hospital Medical Center, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
 10:30AM-7:30PM, SA 9AM-5PM

THOMPSON, CHERYL E

Provider ID: 206338
Provider Gender: Female
License number: A102687
NPI: 1548429863
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Providence St
 Jude Medical Center, Tri City
 Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (844) 308-5003
Fax:
After Hours Phone: (844)
 308-5003
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, T,
 W, ME
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM

TRAN, DAO M

Provider ID: 206338
Provider Gender: Male
License number: 20A14485
NPI: 1659771368
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, T,
 W, ME
Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM

TRAN, DAO M

Provider ID: 400339
Provider Gender: Male
License number: 20A14485
NPI: 1659771368
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY
 CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU
 10:30AM-7:30PM, SA 9AM-5PM

FQHC

VCC DURIAN,

Provider ID: 411518
Provider Gender:
License number: 080000328
NPI: 1851300123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty:
 IHP-VISTA COMMUNITY

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C. Directorio de proveedores de atención primaria

CLINIC

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

VCC DURIAN,

Provider ID: 411518

Provider Gender:

License number: 1851300123

NPI: 1851300123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY
CLINIC

105 DURIAN ST STE A
VISTA, CA 92083-6206

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-F 8:30AM-5PM, SA
9AM-5PM

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: 400339

Provider Gender:

License number: 080000328

NPI: 1851300123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY
CLINIC

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M,W-F 8AM-5PM, TU
10:30AM-7:30PM, SA 9AM-5PM

VISTA COMMUNITY CLINIC,

Provider ID: 206338

Provider Gender:

License number: 080000002

NPI: 1851300123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

VISTA COMMUNITY CLINIC,

Provider ID: 206338

Provider Gender:

License number: 080000002

NPI: 1316501562

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty:

IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

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C. Directorio de proveedores de atención primaria

GENERAL PRACTICE		
RONAN, KEVIN J <i>Provider ID:</i> 206338 <i>Provider Gender:</i> Male <i>License number:</i> G77176 <i>NPI:</i> 1225017353 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, T, W, ME <i>Hours:</i> M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, T, W, ME <i>Hours:</i> M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM DELGADILLO, ALEXANDER <i>Provider ID:</i> 206338 <i>Provider Gender:</i> Male <i>License number:</i> G89399 <i>NPI:</i> 1245298769 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Temecula Valley Hospital Inc <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM	<i>Website:</i> www.vistacommunityclinic.org <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, T, W, ME <i>Hours:</i> M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM DELGADILLO, ALEXANDER <i>Provider ID:</i> 400339 <i>Provider Gender:</i> Male <i>License number:</i> G89399 <i>NPI:</i> 1245298769 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Temecula Valley Hospital Inc <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> <i>Email:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM
INTERNAL MEDICINE		
BOQUIN, ENRIQUE M <i>Provider ID:</i> 206338 <i>Provider Gender:</i> Male <i>License number:</i> C52564 <i>NPI:</i> 1891759403 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	DELGADILLO, ALEXANDER <i>Provider ID:</i> 206338 <i>Provider Gender:</i> Male <i>License number:</i> G89399 <i>NPI:</i> 1245298769 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Temecula Valley Hospital Inc <i>Board Certified Specialty:</i> No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> <i>After Hours Phone:</i> (760) 631-5000	HASSANI, FARZANEH <i>Provider ID:</i> 400339 <i>Provider Gender:</i> Female

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C. Directorio de proveedores de atención primaria

License number: C54458
NPI: 1942204979
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M, W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

MACMURRAY, MICHAEL L
Provider ID: 206338
Provider Gender: Male
License number: A83313
NPI: 1386660280
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

PARIKH, MILIND D
Provider ID: 206338
Provider Gender: Male
License number: 20A13745
NPI: 1194161406
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME

Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

RHIANNON, JULIA
Provider ID: 206338
Provider Gender: Female
License number: C171929
NPI: 1508959347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

WEISSMAN, WILLIAM R
Provider ID: 400339
Provider Gender: Male
License number: G15046
NPI: 1730114992
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital

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C. Directorio de proveedores de atención primaria

Encinitas, Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN
Provider ID: 206338
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS R
Provider ID: 206338
Provider Gender: Female
License number: A125026
NPI: 1659614303
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

FRANCIS, LARRY N
Provider ID: 206338
Provider Gender: Male
License number: A34827
NPI: 1215008552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Murrieta, Sharp Memorial Hospital
Board Certified Specialty: Yes
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:

After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

HAWKINS, MELISSA A
Provider ID: 206338
Provider Gender: Female
License number: A62780
NPI: 1851620447

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C. Directorio de proveedores de atención primaria

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

KARANIKKIS, CHRISTOS A

Provider ID: 206338
Provider Gender: Male
License number: 20A9149
NPI: 1235192691
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

LEON, JOSUE D

Provider ID: 206338
Provider Gender: Male
License number: A80635
NPI: 1497799092
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME

W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

LOPEZ, SANDRA

Provider ID: 206338
Provider Gender: Female
License number: A73316
NPI: 1962421651
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Sharp Chula Vista Med Ctr
Board Certified Specialty: No
IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (858) 715-1316
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

QUAN, MARIA C

Provider ID: 206338
Provider Gender: Female
License number: C143703
NPI: 1043281405
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

PEDIATRICS

AMANI, RAMIN

Provider ID: 79901
Provider Gender: Male
License number: A53984
NPI: 1659366292
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation:
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 950 CIVIC CENTER DR # A
 VISTA, CA 92083-5208

Phone: (760) 439-4839
Fax: (760) 439-4841
After Hours Phone: (760) 439-4839
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

AMBO, STANLEY G

Provider ID: 52269
Provider Gender: Male
License number: G77814
NPI: 1891735676
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2067 W VISTA WAY STE 180
 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

BAILEY, ROMANA

Provider ID: 206338

Provider Gender: Female
License number: A72224
NPI: 1396023685
Provider English Spoken: Yes
Provider Language(s) Spoken: Czech
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Community Memorial Hosp Of San Buenaventura, St Johns Regional Medical Center
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844) 308-5003
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

CASTRO, JORGE L

Provider ID: 100779
Provider Gender: Male
License number: A41618
NPI: 1326082868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

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C. Directorio de proveedores de atención primaria

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2067 W VISTA WAY STE 180
VISTA, CA 92083-6033

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

FREDRICKS, ROBERT E

Provider ID: 206338

Provider Gender: Male

License number: G86902

NPI: 1073524492

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, T,

W, ME

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

GRANT, COLETTE L

Provider ID: 328679

Provider Gender: Female

License number: G65865

NPI: 1073638680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Southwest Healthcare System

Wildomar, Southwest Healthcare
System Murrieta

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2067 W VISTA WAY STE 180
VISTA, CA 92083-6033

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website:

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

GUNTA, SUJANA S

Provider ID: 206338

Provider Gender: Female

License number: A109056

NPI: 1932304342

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Marathi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri
City Medical Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax:

After Hours Phone: (760)
631-5000

Website:

www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, T,
W, ME

Hours: M-TH 8AM-8PM, F
8AM-5PM, SA 9AM-4PM

HARTFORD, NICOLE P

Provider ID: 206338

Provider Gender: Female

License number: 20A14390

NPI: 1346530466

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri
City Medical Ctr

Board Certified Specialty: No
IHP-VISTA COMMUNITY
CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084-5218

Phone: (760) 414-3892

Fax:

After Hours Phone: (760)
414-3892

Website:

www.vistacommunityclinic.org

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

HOKE, EILEEN M

Provider ID: 206338
Provider Gender: Female
License number: A62558
NPI: 1528031457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (844) 308-5003

Fax:
After Hours Phone: (844) 308-5003
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

LUSCHWITZ, BRIAN S

Provider ID: 400339
Provider Gender: Male
License number: A60517

NPI: 1205868510
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM

MOVAHHEDIAN, HAMID R

Provider ID: 206338
Provider Gender: Male
License number: A49253
NPI: 1619920816
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Faroese, Farsi
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

NAUDIN, VERONICA L

Provider ID: 84118
Provider Gender: Female
License number: G75489
NPI: 1093755878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2067 W VISTA WAY STE 180
 VISTA, CA 92083-6033
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website:
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

PARK, SUE A

Provider ID: 206338
Provider Gender: Female
License number: A64003
NPI: 1538176201
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: No
Hospital Affiliation:
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

RAHIMI, NASSRIN

Provider ID: 206338
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

RAYA-MORONES, RUBY A

Provider ID: 206338
Provider Gender: Female
License number: G51286
NPI: 1164467791
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pih Health Hospital - Whittier, Marian Regional Medical Center, Whittier Hospital Medical Center, Providence St Jude Medical Center
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org

Email:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

PHYSICIANS ASSISTANT

WALLACE, STEPHANIE C

Provider ID: 206338
Provider Gender: Female
License number: PA19629
NPI: 1518104942
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
 Board Certified Specialty: No
 IHP-VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Website:
 www.vistacommunityclinic.org
Email:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM

WEAVER, APRIL H

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

C. Directorio de proveedores de atención primaria

Provider ID: 206338 Provider Gender: Female License number: PA20775 NPI: 1063552800 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (844) 308-5003 Fax: After Hours Phone: (844) 308-5003 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, T, W, ME Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM	Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Website: Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: W Hours: M,W-F 8AM-5PM, TU 10:30AM-7:30PM, SA 9AM-5PM	Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
PODIATRIST		
WEAVER, APRIL H Provider ID: 400339 Provider Gender: Female License number: PA20775 NPI: 1063552800 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004	MILLER, JULIE A Provider ID: 206338 Provider Gender: Female License number: DPM3999 NPI: 1619115664 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Board Certified Specialty: No IHP-VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Website: www.vistacommunityclinic.org Email: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, T, W, ME	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ALPINE	Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Provider Gender: Male License number: DC28335 NPI: 1619040292 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ihp-San Ysidro Health Center	Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
CERTIFIED NURSE PRACTITIONER	OPHTHALMOLOGY	CHANG, TOM S , MD Provider ID: 270362 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 Phone: (800) 897-2020 Fax: (844) 897-3788 After Hours Phone: (800) 897-2020 Provider Gender: Male License number: A69909 NPI: 1609848969 Provider English Spoken: Yes Provider Language(s) Spoken: Cantonese Cultural Competency: No Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):
CHIROPRACTOR	BINDER, NICHOLAS R , MD Provider ID: 268753 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1620 ALPINE BLVD STE 117 ALPINE, CA 91901-1103 Phone: (619) 445-2687 Fax: (619) 445-0801 After Hours Phone: (619) 445-2687 Provider Gender: Male License number: A124698 NPI: 1306076716 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes	
ABDULRAHIM, AHMED M Provider ID: 287872 Board Certified Specialty: No IHP-SAN YSIDRO HEALTH CENTER 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262447

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268957

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: G52627

NPI: 1982636031

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 108009

Board Certified Specialty: No

WEST COAST EYE CARE

ASSOCS MED GRP

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 697-2410

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: A125435

NPI: 1235366782

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Memorial

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, GITANE

Provider ID: 262317

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Group-Sd

PATEL, GITANE, MD

Provider ID: 268739

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PATEL, SARJAN H

Provider ID: 262408

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268803

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)

445-2687

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PRABHU, SUJATA P

Provider ID: 262391

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

1620 ALPINE BLVD STE 117

ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 697-2410

After Hours Phone: (619)

445-2687

Provider Gender: Female

License number: A115965

NPI: 1982872552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Telugu,

Vietnamese

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Alvarado

Community Hospital, Scripps

Memorial Hospital, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): Group-Sd
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268918

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103

Phone: (619) 445-2687

Fax: (619) 697-2410

After Hours Phone: (619)
445-2687

Provider Gender: Female

License number: A115965

NPI: 1982872552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Telugu,
Vietnamese

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Alvarado

Community Hospital, Scripps

Memorial Hospital, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical

WAINESS, REID M , MD

Provider ID: 254761

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1620 ALPINE BLVD STE 117
ALPINE, CA 91901-1103

Phone: (800) 898-2020

Fax:

After Hours Phone: (800)
898-2020

Provider Gender: Male

License number: A108766

NPI: 1396935979

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Cantonese, Hebrew,
Korean, Mandarin, Spanish,
Vietnamese

Cultural Competency: No

Hospital Affiliation: San Gabriel
Valley Med Ctr, Desert Regional
Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 5/99

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax:

After Hours Phone: (619)
445-6200

Provider Gender: Male

License number: NP11492

NPI: 1912929936

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CARLSBAD

CERTIFIED BEHAVIORAL ANALYST MASTERS

EVANS, MELISSA

Provider ID: 122850

Board Certified Specialty: No
MAXIM HEALTHCARE
SERVICES INC

2141 PALOMAR AIRPORT RD
STE 350

CARLSBAD, CA 92011-1451

Phone: (760) 438-0078

Fax: (877) 839-6751

After Hours Phone: (760)
438-0078

Provider Gender: Female

License number: BCBA16189

NPI: 1194130484

Provider English Spoken: Yes

Provider Language(s) Spoken:

CAMPO

CERTIFIED NURSE PRACTITIONER

NACE, MICHAEL A , NPA

Provider ID: 240032

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1388 BUCKMAN SPRINGS RD

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D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JACQUART, AMANDA

Provider ID: 123284

Board Certified Specialty: No
CENTER FOR AUTISM AND
RELATED DISORDER

5140 AVENIDA ENCINAS
CARLSBAD, CA 92008-4372

Phone: (760) 795-9898

Fax: (818) 449-0994

After Hours Phone: (760)

795-9898

Provider Gender: Female

License number: BCBA11725364

NPI: 1154854271

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

**CERTIFIED NURSE
PRACTITIONER**

BIERMAN, ANDREW, NPA

Provider ID: 247291

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: NP95011909

NPI: 1306408505

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 18/200

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BINAVI, HOWNAZ Z, NPA

Provider ID: 265369

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE
120

CARLSBAD, CA 92011-4219

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Female

License number: NP95010956

NPI: 1083276273

Provider English Spoken: Yes

Provider Language(s) Spoken:

Kurdish, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BISHOP, LESLIE A, NPA

Provider ID: 243217

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: NP95010047

NPI: 1669941878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Tri City Medical Ctr,

Palomar Medical Center, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 18/200

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

HOOPER, BONNIE J , NPA

Provider ID: 275252

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
120

CARLSBAD, CA 92011-4219

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Female

License number: NP6495

NPI: 1821062878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MCNALLY, PAUL D

Provider ID: 115263

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (619) 543-5540

Fax:

After Hours Phone: (619)

543-5540

Provider Gender: Male

License number: NP19028

NPI: 1588893788

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MCNALLY, PAUL D

Provider ID: 115263

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (619) 543-5540

Fax:

After Hours Phone: (619)

543-5540

Provider Gender: Male

License number: RN706288

NPI: 1588893788

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROSS, JESSICA L

Provider ID: 285921

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: NP95014065

NPI: 1265082838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/200

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DERMATOLOGY

BROUHA, BROOK L , MD

Provider ID: 267945

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE
120

CARLSBAD, CA 92011-4219

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A97902
 NPI: 1114173937
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FAMILY PRACTICE

MADHAV, KINJAL S , MD
 Provider ID: 244004
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: A132338
 NPI: 1124385182
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Gujarati, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 18/200
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

MOUKARZEL, ELIAS N , MD
 Provider ID: 269151
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6125 PASEO DEL NORTE STE 140
 CARLSBAD, CA 92011-1119
 Phone: (760) 352-4103
 Fax: (760) 545-0258
 After Hours Phone: (760) 352-4103
 Provider Gender: Male
 License number: C50303
 NPI: 1205912847
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French, Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HEARING AID DEALER /

SUPPLIER

DAVIS, KELLE L , MD
 Provider ID: 268654
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1820 MARRON RD STE 102
 CARLSBAD, CA 92008-1177
 Phone: (760) 434-0125
 Fax: (760) 434-4531
 After Hours Phone: (760) 434-0125
 Provider Gender: Female
 License number: HA6083
 NPI: 1902853344
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NEUROLOGY

CHOUDRY, BILAL A , MD
 Provider ID: 85292
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A114607
NPI: 1396921144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOUDRY, BILAL A

Provider ID: 85292
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A114607
NPI: 1396921144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DESADIER, LAURA L

Provider ID: 102205
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A14045
NPI: 1245487982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DESADIER, LAURA L

Provider ID: 242451
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000

Provider Gender: Female
License number: 20A14045
NPI: 1245487982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRISHBERG, BENJAMIN M

Provider ID: 65471
Board Certified Specialty: Yes
 NORTH COUNTY NEUROLOGY

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D. Directorio de proveedores de atención especializada

ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: G43493
NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRISHBERG, BENJAMIN M , MD
Provider ID: 65471
Board Certified Specialty: Yes
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: G43493

NPI: 1952346348
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GUALBERTO, GARY C , MD
Provider ID: 103158
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GUALBERTO, GARY C
Provider ID: 103158
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: C138319
NPI: 1689875668
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

LANE, RICHARD A

Provider ID: 276889

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3007

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: A160001

NPI: 1669859443

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Palomar Medical

Center, Pomerado Hospital,

Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/200

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LAWLER, ABIGAIL C , MD

Provider ID: 124983

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: A152080

NPI: 1568789741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LAWLER, ABIGAIL C

Provider ID: 124983

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax:

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: A152080

NPI: 1568789741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 7:30AM-4:30PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LOBATZ, MICHAEL A

Provider ID: 52424

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G38353

NPI: 1619912078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 7:30AM-4:30PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LOBATZ, MICHAEL A , MD

Provider ID: 52424

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3002

Provider Gender: Male

License number: G38353

NPI: 1619912078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

NIELSEN, AMY C

Provider ID: 74893

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

License number: 20A11494

NPI: 1730110529

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NIELSEN, AMY C

Provider ID: 74893

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

License number: 20A11494

NPI: 1730110529

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Pomerado

Hospital, Palomar Medical

Center, Scripps Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 7:30AM-4:30PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

OH, IRENE J

Provider ID: 52430

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE
200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

License number: A106450

NPI: 1306089008

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Pomerado

Hospital, Palomar Medical

Center

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	IPA: Community Care Ipa Llc OMURO, ARTHUR K Provider ID: 276907 Board Certified Specialty: No COMMUNITY CARE IPA LLC 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3007 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: 20A15164 NPI: 1851785505 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Phone: (760) 631-3000 Fax: After Hours Phone: (760) 631-3000 Provider Gender: Female License number: A113451 NPI: 1194933853 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
OH, IRENE J , MD Provider ID: 52430 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: A106450 NPI: 1306089008 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):	PADUGA, REMIA S Provider ID: 57065 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219	PADUGA, REMIA S , MD Provider ID: 57065 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: A113451 NPI: 1194933853 Provider English Spoken: Yes Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Website: Email: Medical Group(s): IPA: Community Care Ipa Llc QUESNELL, TARA A Provider ID: 109393 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: After Hours Phone: (760) 631-3000 Provider Gender: Female License number: 20A13609 NPI: 1619288172 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Pomerado Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc QUESNELL, TARA A Provider ID: 109393 Board Certified Specialty: No NORTH COUNTY NEUROLOGY	ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: 20A13609 NPI: 1619288172 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Pomerado Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc ROSENBERG, JAY H Provider ID: 31935 Board Certified Specialty: No NORTH COUNTY NEUROLOGY ASSOCS MED GRP 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011-4219 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: G17059
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1609804848

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SADOFF, MARK N

Provider ID: 40012

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE

200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G42818

NPI: 1497784946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital,

Scripps Memorial Hospital

Encinitas, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 7:30AM-4:30PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SADOFF, MARK N , MD

Provider ID: 40012

Board Certified Specialty: Yes

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE

200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G42818

NPI: 1497784946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Pomerado Hospital,

Scripps Memorial Hospital

Encinitas, Palomar Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SAHAGIAN, GREGORY A , MD

Provider ID: 65995

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD STE

200

CARLSBAD, CA 92011-4219

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: A62263

NPI: 1831132109

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Pomerado

Hospital, Palomar Medical

Center, Rady Childrens Hospital

San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SAHAGIAN, GREGORY A

Provider ID: 94241

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

6010 HIDDEN VALLEY RD STE

200

CARLSBAD, CA 92011-4219

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
 Fax:
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: A62263
 NPI: 1831132109
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SCHIM, JACK D , MD

Provider ID: 52446
 Board Certified Specialty: Yes
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: G48807
 NPI: 1346276375

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SCHIM, JACK D

Provider ID: 52446
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Male
 License number: G48807
 NPI: 1346276375
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W

Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WANG, ANCHI

Provider ID: 52465
 Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: A79381
 NPI: 1093744542
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 7:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WANG, ANCHI, MD

Provider ID: 52465

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A79381
NPI: 1093744542
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OTOLARYNGOLOGY

DONALDSON, CHADWICK J , MD
Provider ID: 268146
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2390 FARADAY AVE
 CARLSBAD, CA 92008-7216

Phone: (858) 909-0770
Fax:
After Hours Phone: (858) 909-0770
Provider Gender: Male
License number: A84567
NPI: 1891743910
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Temecula Valley Hospital Inc, Scripps Memorial Hospital, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RIEDLER, KIERSTEN L , MD
Provider ID: 256202
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2390 FARADAY AVE
 CARLSBAD, CA 92008-7216
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
License number: A135480
NPI: 1437536216
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sutter Roseville Medical Center, Mercy General Hospital, Sharp Memorial Hospital, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PHYSICAL MEDICINE / REHABILITATION

JAFFER, JIHAD
Provider ID: 119557
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax:
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A98822
NPI: 1366659294
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Palomar Medical Center,
Pomerado Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 7:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JAFFER, JIHAD, MD

Provider ID: 119557
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY
ASSOCS MED GRP
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: A98822
NPI: 1366659294
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital,
Palomar Medical Center,
Pomerado Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MADHAV, SANDIP J , MD
Provider ID: 256381
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000

Provider Gender: Male
License number: A128918
NPI: 1780903492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Tri
City Medical Ctr, Scripps Green
Hospital, Palomar Medical
Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/200
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PHYSICIANS ASSISTANT

BURNEY, MELISSA A

Provider ID: 277535

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Female
License number: PA58612
NPI: 1386260842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEINEN, JOHN P , NPA

Provider ID: 241051
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6010 HIDDEN VALLEY RD STE
200
CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: PA10565
NPI: 1427096643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HERMANSON, KATHLEEN H , NPA

Provider ID: 269004
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA51880
NPI: 1598160343

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INOCELDA, ANDREW G , NPA

Provider ID: 269089
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: PA19207
NPI: 1497950208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PULMONARY DISEASES

HSING, ANDREW Y

Provider ID: 125301
Board Certified Specialty: No
 NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A127271
NPI: 1790769131
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

BIGONI, BRIAN J

Provider ID: 26550
Board Certified Specialty: No
 CARLSBAD IMAGING CTR
 6010 HIDDEN VALLEY RD STE 125
 CARLSBAD, CA 92011-4219
Phone: (760) 730-3536
Fax: (760) 720-4833
After Hours Phone: (760) 730-3536
Provider Gender: Male
License number: A55249
NPI: 1083713002
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Providence Mission Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

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D. Directorio de proveedores de atención especializada

♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
<https://carlsbadimaging.com/>
Email:
Medical Group(s):
IPA:

MAGHSOUDY, AFSANEH

Provider ID: 27175
Board Certified Specialty: No
CARLSBAD IMAGING CTR
6010 HIDDEN VALLEY RD STE 125
CARLSBAD, CA 92011-4219
Phone: (760) 730-3536
Fax: (760) 720-4833
After Hours Phone: (760) 730-3536
Provider Gender: Female
License number: A60622
NPI: 1386742401
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
<https://carlsbadimaging.com/>
Email:
Medical Group(s):
IPA:

REGISTERED PHYSICAL THERAPIST

ALABY, AMY L

Provider ID: 269217

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310
Phone: (760) 591-7750
Fax:
After Hours Phone: (760) 591-7750
Provider Gender: Female
License number: PT42087
NPI: 1003202862
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

AMBROSE, CHRISTOPHER S

Provider ID: 248010
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760) 591-7750
Provider Gender: Male
License number: PT26311
NPI: 1114977535
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 8/125
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BAKER, LISA J

Provider ID: 269094
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310
Phone: (760) 591-7750
Fax:
After Hours Phone: (760) 591-7750
Provider Gender: Female
License number: PT22824
NPI: 1346200045
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BOUTELLE, BARBARA J

Provider ID: 246318
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3070 MADISON ST
CARLSBAD, CA 92008-2310

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D. Directorio de proveedores de atención especializada

Phone: (760) 434-6100
 Fax: (760) 434-4583
 After Hours Phone: (760) 434-6100
 Provider Gender: Female
 License number: PT12716
 NPI: 1437107711
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BOUTELLE, DAVID C

Provider ID: 248307
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3070 MADISON ST
 CARLSBAD, CA 92008-2310
 Phone: (760) 434-6100
 Fax: (760) 434-4583
 After Hours Phone: (760) 434-6100
 Provider Gender: Male
 License number: PT12422
 NPI: 1063461101
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MC GEE, JACQUELINE M

Provider ID: 252472
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3070 MADISON ST
 CARLSBAD, CA 92008-2310
 Phone: (760) 434-6100
 Fax: (760) 471-5139
 After Hours Phone: (760) 434-6100
 Provider Gender: Female
 License number: PT294790
 NPI: 1194217133
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 8/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OLIVEROS, YUNNUEN

Provider ID: 277464
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3070 MADISON ST
 CARLSBAD, CA 92008-2310
 Phone: (760) 434-6100
 Fax: (760) 434-4583
 After Hours Phone: (760) 434-6100
 Provider Gender: Female
 License number: PT294386

NPI: 1295234987
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 110723
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 6010 HIDDEN VALLEY RD STE 200
 CARLSBAD, CA 92011-4219
 Phone: (619) 543-5540
 Fax:
 After Hours Phone: (619) 543-5540
 Provider Gender: Female
 License number: A124866
 NPI: 1942469663
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hebrew, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEN-HAIM, SHARONA

Provider ID: 244069
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A124866
NPI: 1942469663
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BLASKIEWICZ, DONALD J

Provider ID: 270283
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A109748
NPI: 1215176839
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244056
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd

Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHAM, MARTIN H

Provider ID: 127139
Board Certified Specialty: No
UCSD MEDICAL GROUP
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011-4219
Phone: (619) 543-5540
Fax:
After Hours Phone: (619) 543-5540
Provider Gender: Male
License number: A121590
NPI: 1609130921
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PHAM, MARTIN H

Provider ID: 203510

Board Certified Specialty: No

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (619) 543-5540

Fax:

After Hours Phone: (619)

543-5540

Provider Gender: Male

License number: A121590

NPI: 1609130921

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TUNG, HOWARD

Provider ID: 244085

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

6010 HIDDEN VALLEY RD STE 200

CARLSBAD, CA 92011-4219

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G58235

NPI: 1538153341

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital, Tri City

Medical Ctr, Palomar Medical

Center, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHULA VISTA

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J

Provider ID: 204415

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

374 H ST STE 103

CHULA VISTA, CA 91910-5547

Phone: (619) 625-1144

Fax:

After Hours Phone: (619)

625-1144

Provider Gender: Male

License number: A118592

NPI: 1275780686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Pomerado

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NAVARRO, ROSA M

Provider ID: 262220

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

2452 FENTON ST # C101

CHULA VISTA, CA 91914-3599

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)

600-5309

Provider Gender: Female

License number: C53858

NPI: 1083691802

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Memorial

Hospital, Paradise Valley

Hospital, Scripps Green Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

NAVARRO, ROSA M

Provider ID: 262221
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2452 FENTON ST # C203
 CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
 600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Memorial
 Hospital, Paradise Valley
 Hospital, Scripps Green Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

NAVARRO, ROSA M , MD

Provider ID: 268792

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2452 FENTON ST # C101
 CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
 600-5309
Provider Gender: Female
License number: C53858
NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Paradise Valley
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

NAVARRO, ROSA M , MD

Provider ID: 268793
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2452 FENTON ST # C203
 CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619)
 600-5309
Provider Gender: Female
License number: C53858

NPI: 1083691802
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Paradise Valley
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Mercy
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

VERDOLIN, MICHAEL H , MD

Provider ID: 257923
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2452 FENTON ST STE 205
 CHULA VISTA, CA 91914-4551
Phone: (619) 625-1144
Fax:
After Hours Phone: (619)
 625-1144
Provider Gender: Male
License number: A92149
NPI: 1477525657
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Coronado Hosp And
 Healthcare Ctr, Scripps Mercy
 Hospital Chula Vista

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

CARDIOLOGY

AIZIN, VITALI

Provider ID: 103813
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
321 E ST STE A
CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax: (619) 934-3268
After Hours Phone: (619) 934-3260
Provider Gender: Male
License number: A82761
NPI: 1366545733
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd
BERMAN, BRETT J , MD
Provider ID: 268466
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
321 E ST STE A
CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax: (619) 934-3268
After Hours Phone: (619) 934-3260
Provider Gender: Female
License number: A78854
NPI: 1457446684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BERMAN, BRETT J

Provider ID: 35528
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

321 E ST STE A
CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax: (619) 934-3268
After Hours Phone: (619) 934-3260
Provider Gender: Female
License number: A78854
NPI: 1457446684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CEPIN, DANIEL, MD

Provider ID: 268781
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (619) 482-0300
Fax: (619) 482-0959
After Hours Phone: (619) 482-0300
Provider Gender: Male
License number: G52521
NPI: 1053320556
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KAFRI, HASSAN, MD

Provider ID: 265196
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
429 BROADWAY
CHULA VISTA, CA 91910-4320
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Male
License number: A96002
NPI: 1730258401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOHAMEDALI, BURHAN, MD

Provider ID: 245576
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A125669
NPI: 1831393289
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MONDRAGON, GUSTAVO A

Provider ID: 34939
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
480 4TH AVE STE 500
CHULA VISTA, CA 91910-4414

Phone: (619) 656-5252
Fax: (619) 656-5250
After Hours Phone: (619) 656-5252
Provider Gender: Male
License number: A40640
NPI: 1619080041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MOUSSAVIAN, MEHRAN, MD

Provider ID: 242263
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911-6600
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/120 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	765 MEDICAL CENTER CT STE 211 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 616-2100 <i>Fax:</i> (619) 616-2104 <i>After Hours Phone:</i> (619) 616-2100 <i>Provider Gender:</i> Male <i>License number:</i> 20A13745 <i>NPI:</i> 1194161406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
NAGHI, JESSE J , MD <i>Provider ID:</i> 247625 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 752 MEDICAL CENTER CT STE 207 CHULA VISTA, CA 91911-6660 <i>Phone:</i> (619) 867-0557 <i>Fax:</i> <i>After Hours Phone:</i> (619) 867-0557 <i>Provider Gender:</i> Male <i>License number:</i> A110094 <i>NPI:</i> 1386896736 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Bulgarian, Russian, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999	NARAYANAN, MEENA R , MD <i>Provider ID:</i> 247694 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 765 MEDICAL CENTER CT STE 211 CHULA VISTA, CA 91911-6600 <i>Phone:</i> (619) 616-2100 <i>Fax:</i> (619) 616-2104 <i>After Hours Phone:</i> (619) 616-2100 <i>Provider Gender:</i> Female <i>License number:</i> A113448 <i>NPI:</i> 1508170697 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	PONCE, SONIA G <i>Provider ID:</i> 268702 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 450 4TH AVE STE 215 CHULA VISTA, CA 91910-4428 <i>Phone:</i> (619) 434-0204 <i>Fax:</i> (619) 337-0191 <i>After Hours Phone:</i> (619) 434-0204 <i>Provider Gender:</i> Female <i>License number:</i> A145008 <i>NPI:</i> 1164659033 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps
PARIKH, MILIND D <i>Provider ID:</i> 268745 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC		

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D. Directorio de proveedores de atención especializada

Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RUTLEDGE, MICHAEL R

Provider ID: 268763
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5851
Fax:
After Hours Phone: (619)
502-5851
Provider Gender: Male
License number: C166106
NPI: 1265624167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEREV, DIMITRI A , MD

Provider ID: 268950

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
752 MEDICAL CENTER CT STE
207
CHULA VISTA, CA 91911-6660
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619)
867-0557
Provider Gender: Male
License number: A70917
NPI: 1154323996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bulgarian, Malayalam, Russian,
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital,
Alvarado Community Hospital,
Sharp Memorial Hospital, Scripps
Memorial Hospital, Alvarado
Hospital Llc, Sharp Chula Vista
Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHETABI, KAMBIZ

Provider ID: 268772
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE
211
CHULA VISTA, CA 91911-6600

Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619)
616-2100
Provider Gender: Male
License number: A126187
NPI: 1972827806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WYSOCZANSKI, MARIUSZ W

Provider ID: 124990
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
750 MEDICAL CENTER CT STE
3
CHULA VISTA, CA 91911-6634
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: C55986
NPI: 1659535656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd
BERMAN, BRETT J
 Provider ID: 257542
 Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 321 E ST STE A
 CHULA VISTA, CA 91910-2667
 Phone: (619) 934-3260
 Fax: (619) 934-3268

INC
 480 4TH AVE STE 401
 CHULA VISTA, CA 91910-4413
 Phone: (619) 427-8646
 Fax: (619) 425-7128
 After Hours Phone: (619) 427-8646
 Provider Gender: Male
 License number: A37537
 NPI: 1851332803
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-6PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CARDIOVASCULAR DISEASE

AIZIN, VITALI
 Provider ID: 39325
 Board Certified Specialty: No
 VITALI AIZIN MD INC
 321 E ST STE A
 CHULA VISTA, CA 91910-2667
 Phone: (619) 934-3260
 Fax: (619) 934-3268
 After Hours Phone: (619) 934-3260
 Provider Gender: Male
 License number: A82761
 NPI: 1366545733
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-TH 8AM-5PM, F 8AM-4PM, SA 9AM-5PM
 Website:

After Hours Phone: (619) 934-3260
 Provider Gender: Female
 License number: A78854
 NPI: 1457446684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SZKOPIEC, ROMAN L
 Provider ID: 35527
 Board Certified Specialty: No
 CHULA VISTA HEART CLINIC

CERTIFIED NURSE PRACTITIONER

AKINS, MELANIE R
 Provider ID: 125136
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
 Phone: (916) 421-3361
 Fax:
 After Hours Phone: (916) 421-3361
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95008069

NPI: 1508370875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

AKINS, MELANIE R

Provider ID: 262342

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

752 MEDICAL CENTER CT STE

302

CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)

421-3361

Provider Gender: Female

License number: NP95008069

NPI: 1508370875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

AKINS, MELANIE R , NPA

Provider ID: 268746

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

752 MEDICAL CENTER CT STE

302

CHULA VISTA, CA 91911-6661

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)

421-3361

Provider Gender: Female

License number: NP95008069

NPI: 1508370875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

BATAC, NADINE M

Provider ID: 113818

Board Certified Specialty: No

SYNOVATION MEDICAL

GROUP

340 4TH AVE STE 19

CHULA VISTA, CA 91910-3898

Phone: (619) 761-5308

Fax:

After Hours Phone: (619)

761-5308

Provider Gender: Female

License number: NP21763

NPI: 1942657937

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CARAPIA, FABIOLA

Provider ID: 54496

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Female

License number: NP20855

NPI: 1184905994

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 251 LANDIS AVE
 No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

CARAPIA, FABIOLA

Provider ID: 54496
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
 427-1144
Provider Gender: Female
License number: RN603937
NPI: 1184905994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FISH, PAMELA B

Provider ID: 260588
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 865 3RD AVE STE 101
 CHULA VISTA, CA 91911-1349
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619)
 426-7910
Provider Gender: Female
License number: NP14601
NPI: 1063651867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

FERNANDEZ LEYVA, JUAN C

Provider ID: 109771
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER

Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GRUBENSKY, LINDSAY T

Provider ID: 261029
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 769 MEDICAL CENTER CT STE
 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619)
 482-3090
Provider Gender: Female
License number: NP20953
NPI: 1619255577
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GUADARRAMA, IGNACIO

Provider ID: 262418

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 1323 3RD AVE
 CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Provider Gender: Male
License number: NP95003671
NPI: 1821331174
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

HUYNH, KIMBERLY T

Provider ID: 261046
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Provider Gender: Female
License number: NP95005078
NPI: 1376094144
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JERSEY, KAREN

Provider ID: 109692
Board Certified Specialty: No
SYNOVATION MEDICAL GROUP
 340 4TH AVE STE 19
 CHULA VISTA, CA 91910-3898
Phone: (619) 761-5308

Fax:
After Hours Phone: (619) 761-5308
Provider Gender: Female
License number: NP21684
NPI: 1700150695
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEONARD, BEVERLY S

Provider ID: 115083
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500

Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: NP10943
NPI: 1285772392

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARNELL, TANIKA E

Provider ID: 287647
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 769 MEDICAL CENTER CT STE 300
 CHULA VISTA, CA 91911-6602
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95013165
 NPI: 1679121750
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SOTO, ROBIN J

Provider ID: 80435
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-RICE FAM HC
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2325
 Fax:
 After Hours Phone: (619)
 515-2325
 Provider Gender: Female
 License number: NP11778
 NPI: 1487688099
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website: www.fhcsd.org

Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-Rice Fam Hc
 IPA:

CHIROPRACTOR

KAZEM, HARON H

Provider ID: 287164
 Board Certified Specialty: No
 IHP-SAN YSIDRO HEALTH
 CENTER
 678 3RD AVE
 CHULA VISTA, CA 91910-5736
 Phone: (619) 662-4100
 Fax: (619) 425-1184
 After Hours Phone: (619)
 662-4100
 Provider Gender: Male
 License number: DC33295
 NPI: 1306221262
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ihp-San Ysidro Health
 Center

DERMATOLOGY

STEIN, ALEXANDER D , MD

Provider ID: 268620
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 14

CHULA VISTA, CA 91910-3813
 Phone: (619) 303-3681
 Fax: (760) 687-2825
 After Hours Phone: (619)
 303-3681
 Provider Gender: Male
 License number: A106295
 NPI: 1760431654
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French, Romanian
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ENDOCRINOLOGY METABOLISM DIABETES

ROGERS, MEGAN O

Provider ID: 268585
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
 Phone: (619) 427-3362
 Fax: (619) 271-7914
 After Hours Phone: (619)
 427-3362
 Provider Gender: Female
 License number: A122784
 NPI: 1982993374
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	IPA: CHERY, FARAH Y Provider ID: 78248 Board Certified Specialty: No FAMILY HLTH CTR SAN DIEGO-RICE FAM HC 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2325 Fax: After Hours Phone: (619) 515-2325 Provider Gender: Female License number: A108681 NPI: 1114183688 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 8AM-5PM, SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc IPA:	Phone: (619) 427-3361 Fax: (619) 827-0539 After Hours Phone: (619) 427-3361 Provider Gender: Female License number: 20A6906 NPI: 1255441606 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
FAMILY PRACTICE		
CHERY, FARAH Y Provider ID: 78244 Board Certified Specialty: No CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Female License number: A108681 NPI: 1114183688 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Chula Vista Family Hlth Ctr	CORSENTINO-MATSUMOTO, LISA Provider ID: 268750 Board Certified Specialty: No COMMUNITY CARE IPA LLC 480 4TH AVE STE 202 CHULA VISTA, CA 91910-4412	NGUYEN, LINH T Provider ID: 129960 Board Certified Specialty: No FAMILY HLTH CTR SAN DIEGO-RICE FAM HC 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2325 Fax: After Hours Phone: (619) 515-2325 Provider Gender: Female License number: A144995 NPI: 1619357993 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

NGUYEN, LINH T

Provider ID: 129961
Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: A144995
NPI: 1619357993
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

RABAGO, MAURELLEN B

Provider ID: 268698
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0551
After Hours Phone: (619) 427-3361
Provider Gender: Female
License number: A146307
NPI: 1720421076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAJ, ASHA P

Provider ID: 127616
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A15683
NPI: 1003293507
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

RAJ, ASHA P

Provider ID: 127617
Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Provider Gender: Female
License number: 20A15683
NPI: 1003293507
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

YELANICH, MELISSA R

Provider ID: 268649
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3361
Fax: (619) 827-0551
After Hours Phone: (619) 427-3361
Provider Gender: Female
License number: A122649
NPI: 1881905362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GASTROENTEROLOGY

ALAYO, ERICK H

Provider ID: 285204
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
 400 E ST
 CHULA VISTA, CA 91910-2413
Phone: (619) 382-3315
Fax:
After Hours Phone: (619) 382-3315
Provider Gender: Male
License number: A107506
NPI: 1841454758

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

CUBAS, IVAN P

Provider ID: 109374
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
 1040 TIERRA DEL REY STE 107
 CHULA VISTA, CA 91910-7865
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Male
License number: C55825
NPI: 1447464912
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

DUQUE, JOHN J , MD

Provider ID: 268572
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 480 4TH AVE STE 316
 CHULA VISTA, CA 91910-4403
Phone: (619) 691-0240
Fax: (619) 691-8804
After Hours Phone: (619) 691-0240
Provider Gender: Male
License number: G48442
NPI: 1295710747
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DUQUE, JOHN J

Provider ID: 32024
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
480 4TH AVE STE 316
CHULA VISTA, CA 91910-4403
Phone: (619) 691-0240
Fax: (619) 691-8804
After Hours Phone: (619) 691-0240
Provider Gender: Male
License number: G48442
NPI: 1295710747
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HASSANEIN, TAREK I , MD

Provider ID: 269555
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
256 LANDIS AVE STE 202
CHULA VISTA, CA 91910-2650

Phone: (619) 332-1221
Fax: (619) 869-4027
After Hours Phone: (619) 332-1221
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Alvarado Hospital Llc, Hoag Hospital Irvine
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HASSANEIN, TAREK I , MD

Provider ID: 269558
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1323 3RD AVE
CHULA VISTA, CA 91911-4302
Phone: (619) 409-6900
Fax: (619) 409-6901
After Hours Phone: (619) 409-6900
Provider Gender: Male

License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Alvarado Hospital Llc, Hoag Hospital Irvine
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

THOMAS, CARLTON W

Provider ID: 262218
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
1040 TIERRA DEL REY STE 107
CHULA VISTA, CA 91910-7865
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Male
License number: A88112
NPI: 1205881398
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

WIENER, GREGORY J

Provider ID: 257480
Board Certified Specialty: Yes
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 353 CHURCH AVE # A
 CHULA VISTA, CA 91910-3906
Phone: (619) 585-8883
Fax: (619) 585-0166
After Hours Phone: (619) 585-8883
Provider Gender: Male
License number: A41749
NPI: 1811099534
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

WIENER, GREGORY J

Provider ID: 257481
Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 353 CHURCH AVE # A
 CHULA VISTA, CA 91910-3906
Phone: (619) 585-8883
Fax: (619) 585-0166
After Hours Phone: (619) 585-8883
Provider Gender: Male
License number: A41749
NPI: 1811099534
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health

Plan Direct

GENETICS MEDICAL

NIEMI, ANNA-KAISA

Provider ID: 127722
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 435 H ST
 CHULA VISTA, CA 91910-4307
Phone: (619) 691-7249
Fax:
After Hours Phone: (619) 691-7249
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD

Provider ID: 268688
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 310 3RD AVE STE C11
 CHULA VISTA, CA 91910-3965

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 426-0841
 Fax: (619) 426-9197
 After Hours Phone: (619) 426-0841
 Provider Gender: Female
 License number: HA7100
 NPI: 1063558856
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DAVIS, KELLE L , MD

Provider ID: 268651
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 310 3RD AVE STE C11
 CHULA VISTA, CA 91910-3965
 Phone: (619) 426-0841
 Fax: (619) 426-9197
 After Hours Phone: (619) 426-0841
 Provider Gender: Female
 License number: HA6083
 NPI: 1902853344
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HEMATOLOGY / ONCOLOGY

AL-KOURAINY, KOUSAY A

Provider ID: 262225
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 480 4TH AVE STE 409
 CHULA VISTA, CA 91910-4413
 Phone: (619) 425-2080
 Fax: (619) 425-8410
 After Hours Phone: (619) 425-2080
 Provider Gender: Male
 License number: A39783
 NPI: 1457361271
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

JOHNSON, KENNETH B

Provider ID: 262288
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 769 MEDICAL CENTER CT STE 202
 CHULA VISTA, CA 91911-6602
 Phone: (619) 482-8430
 Fax: (619) 482-8005
 After Hours Phone: (619) 482-8430
 Provider Gender: Male
 License number: A79802
 NPI: 1063527711
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

NORTON, MARILYN S

Provider ID: 65656
 Board Certified Specialty: No
 SOUTH COUNTY
 HEMATOLOGY ONCOLOGY
 INC
 769 MEDICAL CENTER CT STE 202
 CHULA VISTA, CA 91911-6602
 Phone: (619) 482-8430
 Fax:
 After Hours Phone: (619) 482-8430
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G70444
 NPI: 1417060054
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

**SOUTH COUNTY
 HEMATOLOGY ONCOLOGY
 INC,**
 Provider ID: 200428
 Board Certified Specialty: IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 769 MEDICAL CENTER CT STE 202
 CHULA VISTA, CA 91911-6602
 Phone: (619) 482-8430
 Fax: (619) 482-8005
 After Hours Phone: (619) 482-8430
 Provider Gender:
 License number:
 NPI: 1326124819
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

INTERNAL MEDICINE GERIATRIC MEDICINE

GUTIERREZ, AIREEN L
 Provider ID: 268646
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 202
 CHULA VISTA, CA 91910-4412
 Phone: (619) 427-3361
 Fax:
 After Hours Phone: (619) 427-3361
 Provider Gender: Female
 License number: A77031
 NPI: 1306857701
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Ucsd Medical Group

INTERNAL MEDICINE

AL-KOURAINY, KOUSAY A
 Provider ID: 27249
 Board Certified Specialty: No
 KOUSAY ABDULLAH AL KOURAINY
 480 4TH AVE STE 409
 CHULA VISTA, CA 91910-4413
 Phone: (619) 425-2080
 Fax: (619) 425-8410
 After Hours Phone: (619) 425-2080
 Provider Gender: Male
 License number: A39783
 NPI: 1457361271
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

LIRA, JOSE A , MD
 Provider ID: 268769
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
 Phone: (619) 482-7301
 Fax: (619) 482-7302
 After Hours Phone: (619) 482-7301

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A33913
NPI: 1356319446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LIRA, JOSE A

Provider ID: 34349
Board Certified Specialty: No
 SOUTH BAY PULMONARY MED GRP
 841 KUHN DR STE 200
 CHULA VISTA, CA 91914-4523
Phone: (619) 482-7301
Fax: (619) 482-7302
After Hours Phone: (619) 482-7301
Provider Gender: Male
License number: A33913
NPI: 1356319446
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M,TU,TH 8:30AM-5PM, W 8:30AM-4:45PM, F 8:30AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M , MD

Provider ID: 268563
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Imperial Health Holdings Medical Group-Sd

MEYER, JILL M , MD

Provider ID: 65487
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

WATKINS, ELAINE J

Provider ID: 116902
Board Certified Specialty: No
 PLANNED PARENTHOOD OF THE PACIFIC SOUTHWEST
 1295 BROADWAY STE 201
 CHULA VISTA, CA 91911-2975

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (888) 743-7526

Fax:

After Hours Phone: (888)
743-7526

Provider Gender: Female

License number: 20A6234

NPI: 1225019557

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M 7AM-6PM, TU-TH
7AM-7:30PM, F 7AM-5:30PM,
SA 7AM-4PM

Website:

Email:

Medical Group(s):

IPA:

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD

Provider ID: 244812

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
751 MEDICAL CENTER CT #
211

CHULA VISTA, CA 91911-6617

Phone: (619) 616-2100

Fax:

After Hours Phone: (619)
616-2100

Provider Gender: Male

License number: A109957

NPI: 1467602946

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Garfield
Medical Center, Santa Monica
Ucla Med Ctr, Ronald Reagan

Ucla Med Ctr, Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOUSSAVIAN, MEHRAN

Provider ID: 40191

Board Certified Specialty: No
CARDIOVASCULAR INSTITUTE
OF SAN DIEGO
765 MEDICAL CENTER CT STE
211

CHULA VISTA, CA 91911-6600

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205634

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

386 E H ST STE 202
CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 272671
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 205839
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 205745
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-8133
Fax: (858) 966-1725
After Hours Phone: (858) 966-8133
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes

Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Provider ID: 277263
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
386 E H ST STE 202
CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 264687

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

License number: C160063

NPI: 1154305977

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D

Provider ID: 205440

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

License number: A109228

NPI: 1477563302

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

TITH, TEVY

Provider ID: 205391

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 242523

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 206232

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202

CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Stanford Health Care, Lucile

Salter Packard Childrens Hosp, San Mateo Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH E

Provider ID: 205646

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

435 H ST

CHULA VISTA, CA 91910-4307

Phone: (619) 691-7000

Fax:

After Hours Phone: (619) 691-7000

Provider Gender: Female

License number: A89838

NPI: 1679809826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MARDOUM, RIAD

Provider ID: 262123

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

435 H ST

CHULA VISTA, CA 91910-4307

Phone: (619) 691-7000

Fax:

After Hours Phone: (619) 691-7000

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NIEMI, ANNA-KAISA

Provider ID: 262159

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

435 H ST
CHULA VISTA, CA 91910-4307
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEPHROLOGY

BEDOYA, LUIS A
Provider ID: 39369
Board Certified Specialty: Yes
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: A51105
NPI: 1922119445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BEDOYA, LUIS A , MD
Provider ID: 39369
Board Certified Specialty: Yes
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: A51105
NPI: 1922119445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BEDOYA, LUIS A
Provider ID: 39369
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: A51105
NPI: 1922119445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.balboacare.com
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HOREISH, ADAM K

Provider ID: 99947
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Male
License number: C56089
NPI: 1760461206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
W
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HOREISH, ADAM K , MD

Provider ID: 99947

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144
Provider Gender: Male
License number: C56089
NPI: 1760461206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HOREISH, ADAM K

Provider ID: 99947
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619)
427-1144

Provider Gender: Male
License number: C56089
NPI: 1760461206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KHAING, KATHY

Provider ID: 128616
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax:
After Hours Phone: (619)
427-1144
Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KHAING, KATHY, MD
Provider ID: 205003
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken: Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc
LOZADA-PASTORIO, ELIZABETH
Provider ID: 262289
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144

Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH, MD
Provider ID: 268556
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH, MD
Provider ID: 31395
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 340 4TH AVE STE 14
 CHULA VISTA, CA 91910-3813
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 31395
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 340 4TH AVE STE 14
 CHULA VISTA, CA 91910-3813
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 31395
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Provider ID: 82253
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 752 MEDICAL CENTER CT STE 302
 CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LOZADA-PASTORIO, ELIZABETH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider ID: 82253
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A90108
NPI: 1730160425
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M

Provider ID: 262110
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M

Provider ID: 262111
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MEYER, JILL M

Provider ID: 55805
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax:
After Hours Phone: (619) 427-1144
Provider Gender: Female
License number: A95882
NPI: 1255394789
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com

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D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 <i>Phone:</i> (858) 810-8000 <i>Fax:</i> (619) 427-1185 <i>After Hours Phone:</i> (858) 810-8000 <i>Provider Gender:</i> Male <i>License number:</i> A158295 <i>NPI:</i> 1821359605 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
MEYER, JILL M <i>Provider ID:</i> 65487 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911-6661 <i>Phone:</i> (619) 421-3361 <i>Fax:</i> <i>After Hours Phone:</i> (619) 421-3361 <i>Provider Gender:</i> Female <i>License number:</i> A95882 <i>NPI:</i> 1255394789 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.balboacare.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	SOLTERO, RICARDO A <i>Provider ID:</i> 262113 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 <i>Phone:</i> (619) 427-1144 <i>Fax:</i> (619) 427-1185 <i>After Hours Phone:</i> (619) 427-1144 <i>Provider Gender:</i> Male <i>License number:</i> A68995 <i>NPI:</i> 1841295482 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R	
PATEL, AMAR V , MD <i>Provider ID:</i> 245639 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	SOLTERO, RICARDO A <i>Provider ID:</i> 257492 <i>Board Certified Specialty:</i> Yes BLUE SHIELD PROMISE HEALTH PLAN DIRECT 340 4TH AVE STE 4 CHULA VISTA, CA 91910-3885 <i>Phone:</i> (619) 427-1144 <i>Fax:</i> (619) 427-1185 <i>After Hours Phone:</i> (619) 427-1144 <i>Provider Gender:</i> Male <i>License number:</i> A68995 <i>NPI:</i> 1841295482 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A

Provider ID: 26526

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 14

CHULA VISTA, CA 91910-3813

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A , MD

Provider ID: 26526

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 14

CHULA VISTA, CA 91910-3813

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)

427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A

Provider ID: 26526

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, W

Hours: M-F 9AM-5PM, SA 9AM-5PM

Website: www.balboacare.com

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SOLTERO, RICARDO A , MD

Provider ID: 268490

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC 340 4TH AVE STE 4

CHULA VISTA, CA 91910-3885

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619) 427-1144

Provider Gender: Male

License number: A68995

NPI: 1841295482

Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd VIDEEN, JOHN Provider ID: 262286 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911-6661 Phone: (619) 421-3361 Fax: (619) 869-4378 After Hours Phone: (619) 421-3361 Provider Gender: Male License number: G59271 NPI: 1043318199 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 9AM-5PM, SA 9AM-5PM Website: www.balboacare.com Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Group-Sd VIDEEN, JOHN Provider ID: 65646 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911-6661 Phone: (619) 421-3361 Fax: (619) 869-4378 After Hours Phone: (619) 421-3361 Provider Gender: Male License number: G59271 NPI: 1043318199 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-F 9AM-5PM, SA 9AM-5PM Website: www.balboacare.com Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
SOLTERO, RICARDO A , MD Provider ID: 268491 Board Certified Specialty: No COMMUNITY CARE IPA LLC 752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911-6661 Phone: (619) 421-3361 Fax: After Hours Phone: (619) 421-3361 Provider Gender: Male License number: A68995 NPI: 1841295482 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999	American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical	VIDEEN, JOHN, MD Provider ID: 65646 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 752 MEDICAL CENTER CT STE 302

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHULA VISTA, CA 91911-6661
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Male
License number: G59271
NPI: 1043318199
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

YUAN, HENRY, MD

Provider ID: 268551
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 340 4TH AVE STE 4
 CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: A120403
NPI: 1043442379
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Paradise Valley Hospital, Providence St Joseph Hospital, Providence St Jude Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD

Provider ID: 127244
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 750 MEDICAL CENTER CT STE 6
 CHULA VISTA, CA 91911-6634
Phone: (619) 337-7900
Fax: (619) 337-7902
After Hours Phone: (619) 337-7900
Provider Gender: Male
License number: A98831
NPI: 1902973472
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OBSTETRICS / GYNECOLOGY

ADAMCZAK, JOANNA E

Provider ID: 121816
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ALIMONOS, LYSISTRATI A

Provider ID: 114817

Board Certified Specialty: No
CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2500

Fax:

After Hours Phone: (619)

515-2500

Provider Gender: Female

License number: 20A14919

NPI: 1619397031

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Chula Vista
Family Hlth Ctr

IPA:

ANGUIANO, FRANCISCO E

Provider ID: 205791

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

765 MEDICAL CENTER CT STE
209

CHULA VISTA, CA 91911-6600

Phone: (619) 427-8892

Fax: (619) 422-7660

After Hours Phone: (619)
427-8892

Provider Gender: Male

License number: G61584

NPI: 1215921697

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

ANGUIANO, FRANCISCO E , MD

Provider ID: 268797

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

765 MEDICAL CENTER CT STE
209

CHULA VISTA, CA 91911-6600

Phone: (619) 427-8892

Fax: (619) 422-7660

After Hours Phone: (619)
427-8892

Provider Gender: Male

License number: G61584

NPI: 1215921697

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

ANGUIANO, FRANCISCO E

Provider ID: 27382

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

765 MEDICAL CENTER CT STE
209

CHULA VISTA, CA 91911-6600

Phone: (619) 427-8892

Fax: (619) 422-7660

After Hours Phone: (619)

427-8892

Provider Gender: Male

License number: G61584

NPI: 1215921697

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

ATIGA, SCHUBERT J , MD

Provider ID: 268953
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 752 MEDICAL CENTER CT STE 106
 CHULA VISTA, CA 91911-6659
 Phone: (619) 482-8406
 Fax: (619) 482-6656
 After Hours Phone: (619) 482-8406
 Provider Gender: Male
 License number: G53756
 NPI: 1033138714
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ATIGA, SCHUBERT J

Provider ID: 27235
 Board Certified Specialty: No
 LIFETIME WOMENS HEALTH CARE MED ASSOCS INC
 752 MEDICAL CENTER CT STE 106
 CHULA VISTA, CA 91911-6659
 Phone: (619) 482-8406
 Fax:
 After Hours Phone: (619) 482-8406
 Provider Gender: Male
 License number: G53756
 NPI: 1033138714
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M,TU,TH 9AM-5PM, W,F,SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BUECHNER, CHARLENE A

Provider ID: 127424
 Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Provider Gender: Female
 License number: A68463

NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chula Vista Family Hlth Ctr
 IPA:

CARSON, LATISA S

Provider ID: 27071
 Board Certified Specialty: No
 UNIQUE HEALTHCARE FOR WOMEN MEDICAL CORP
 891 KUHN DR STE 111
 CHULA VISTA, CA 91914-3551
 Phone: (619) 475-9744
 Fax:
 After Hours Phone: (619) 475-9744
 Provider Gender: Female
 License number: A72235
 NPI: 1245229129
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-TH 8AM-5PM, F 8AM-3PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CARTER, KHALIL J

Provider ID: 127374
 Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Provider Gender: Male
 License number: A113001
 NPI: 1225231582
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chula Vista Family Hlth Ctr
 IPA:

CASELE, HOLLY L

Provider ID: 121820
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486
 Phone: (858) 966-6710
 Fax:
 After Hours Phone: (858) 966-6710

Provider Gender: Female
 License number: G87630
 NPI: 1255348744
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 121849
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486

Phone: (858) 966-8133
 Fax:
 After Hours Phone: (858) 966-8133
 Provider Gender: Male
 License number: G46026
 NPI: 1174694939
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CERVANTES, SANDRA M

Provider ID: 114861
 Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

CHAC, RICK T

Provider ID: 210483
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 660 OLD TELEGRAPH CANYON RD
 CHULA VISTA, CA 91910-6587
Phone: (619) 482-2400
Fax: (619) 482-2411
After Hours Phone: (619) 482-2400
Provider Gender: Male
License number: A105379
NPI: 1538347760
Provider English Spoken: Yes
Provider Language(s) Spoken: Cantonese, Chinese, Mandarin, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120505
Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

LIPSCHITZ, LISA S

Provider ID: 115426
Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

LOEFFLER, ALLISON M

Provider ID: 115559
Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Female License number: A116680 NPI: 1700073962 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM Website: www.fhcscd.org Email: Medical Group(s): Chula Vista Family Hlth Ctr IPA:	Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM Website: www.fhcscd.org Email: Medical Group(s): Chula Vista Family Hlth Ctr IPA:	T, ME Hours: M-SA 9AM-5PM Website: www.fhcscd.org Email: Medical Group(s): Chula Vista Family Hlth Ctr IPA:
MELENDEZ BERRIOS, IARA DEL M Provider ID: 115025 Board Certified Specialty: No CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Female License number: A114181 NPI: 1740514249 Provider English Spoken: Yes Provider Language(s) Spoken:	RODRIGUEZ JEREZ, ROBERTO D Provider ID: 130086 Board Certified Specialty: No CHULA VISTA FAMILY HLTH CTR 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2500 Fax: After Hours Phone: (619) 515-2500 Provider Gender: Male License number: A154298 NPI: 1710316450 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R,	SEFA-BOAKYE, KOFI D Provider ID: 205412 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 340 4TH AVE STE 5 CHULA VISTA, CA 91910-3813 Phone: (619) 422-2121 Fax: (619) 422-2427 After Hours Phone: (619) 422-2121 Provider Gender: Male License number: G59670 NPI: 1902993660 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
		TITH, TEVY Provider ID: 73302

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 121985
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 386 E H ST STE 202
 CHULA VISTA, CA 91910-7486

Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WINESBURG, JENNIFER J

Provider ID: 114800
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A11535
NPI: 1811162456

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chula Vista Family Hlth Ctr
IPA:

ZIEG, ALAN J

Provider ID: 114831
Board Certified Specialty: No
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chula Vista
 Family Hlth Ctr
 IPA:

OPHTHALMOLOGY

BRYANT, DUANE M , MD
 Provider ID: 244753
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 342 F ST
 CHULA VISTA, CA 91910-2625
 Phone: (619) 422-1471
 Fax: (619) 422-0450
 After Hours Phone: (619)
 422-1471
 Provider Gender: Male
 License number: C155562
 NPI: 1023117124
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 13/130
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CARRABY, ARNETT
 Provider ID: 103061
 Board Certified Specialty: Yes
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax:
 After Hours Phone: (619)
 425-7755
 Provider Gender: Male
 License number: G47836
 NPI: 1366530792
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro
 Regional Medical Center,
 Pioneers Memorial Hospital,
 Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CARRABY, ARNETT, MD
 Provider ID: 103061
 Board Certified Specialty: Yes
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619)
 425-7755
 Provider Gender: Male
 License number: G47836

NPI: 1366530792
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro
 Regional Medical Center,
 Pioneers Memorial Hospital,
 Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CASTILLEJOS-RIOS, DAVID
 Provider ID: 26867
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 342 F ST
 CHULA VISTA, CA 91910-2625
 Phone: (619) 422-1471
 Fax: (619) 422-0450
 After Hours Phone: (619)
 422-1471
 Provider Gender: Male
 License number: A44482
 NPI: 1558446401
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No ☞ <i>Accessibility:</i> P, EB, IB, E <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	CASTILLEJOS, MARIA E <i>Provider ID:</i> 26458 <i>Board Certified Specialty:</i> Yes CASTILLEJOS EYE INSTITUTE MEDICAL GROUP 342 F ST CHULA VISTA, CA 91910-2625 <i>Phone:</i> (619) 422-1471 <i>Fax:</i> (619) 422-0450 <i>After Hours Phone:</i> (619) 422-1471 <i>Provider Gender:</i> Female <i>License number:</i> A37652 <i>NPI:</i> 1043395098 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	CHULA VISTA, CA 91910-2625 <i>Phone:</i> (619) 422-1471 <i>Fax:</i> <i>After Hours Phone:</i> (619) 422-1471 <i>Provider Gender:</i> Female <i>License number:</i> A37652 <i>NPI:</i> 1043395098 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M,W,F 8AM-5PM, TU,TH 7AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
CASTILLEJOS-RIOS, DAVID, MD <i>Provider ID:</i> 268782 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 342 F ST CHULA VISTA, CA 91910-2625 <i>Phone:</i> (619) 422-1471 <i>Fax:</i> (619) 422-0450 <i>After Hours Phone:</i> (619) 422-1471 <i>Provider Gender:</i> Male <i>License number:</i> A44482 <i>NPI:</i> 1558446401 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ☞ <i>Accessibility:</i> P, EB, IB, E <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	CASTILLEJOS, MARIA E <i>Provider ID:</i> 26458 <i>Board Certified Specialty:</i> No CASTILLEJOS EYE INSTITUTE MEDICAL GROUP 342 F ST	CASTILLEJOS, MARIA E , MD <i>Provider ID:</i> 268747 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 342 F ST CHULA VISTA, CA 91910-2625 <i>Phone:</i> (619) 422-1471 <i>Fax:</i> (619) 422-0450 <i>After Hours Phone:</i> (619) 422-1471 <i>Provider Gender:</i> Female <i>License number:</i> A37652

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D. Directorio de proveedores de atención especializada

NPI: 1043395098
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHAVEZ, CESAR T , MD

Provider ID: 268776
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: G51615
 NPI: 1720082563
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Paradise Valley Hospital, Scripps

Mercy Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DELENGOCKY, TAYSON

Provider ID: 78153
 Board Certified Specialty: Yes
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DELENGOCKY, TAYSON

Provider ID: 78153
 Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
 Phone: (619) 425-7755
 Fax:
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ECHEGOYEN, JULIO C

Provider ID: 101658
 Board Certified Specialty: No
 EYE INSTITUTE OF CALIFORNIA MED GRP
 480 4TH AVE STE 201
 CHULA VISTA, CA 91910-4412
 Phone: (619) 427-3355
 Fax:
 After Hours Phone: (619) 427-3355
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A121431
NPI: 1770801540
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ECHEGOYEN, JULIO C , MD
Provider ID: 257137
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-9057
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A121431
NPI: 1770801540
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GOLDMAN, RONALD J , MD
Provider ID: 26488
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 201
 CHULA VISTA, CA 91910-4412
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619) 427-3355
Provider Gender: Male
License number: C27512
NPI: 1114928082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc
KHANDAN, SARA, MD
Provider ID: 268580
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A155828
NPI: 1063850808
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Hemet Valley Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, MAJID, MD
Provider ID: 269193
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, MAJID

Provider ID: 26922
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MANI, NASRIN, MD
Provider ID: 269199
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, NASRIN

Provider ID: 27356
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MCDONNELL, EMMA C
Provider ID: 283536
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 835 3RD AVE STE A
 CHULA VISTA, CA 91911-1352
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A172521
NPI: 1023357670
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18/200 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Email: Medical Group(s): IPA: Community Care Ipa Llc PAPASTERGIOU, GEORGIOS Provider ID: 204144 Board Certified Specialty: Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A127706 NPI: 1790054393 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A127706 NPI: 1790054393 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
MOSS, JASON M , MD Provider ID: 106478 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A130529 NPI: 1386961423 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website:	Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PAPASTERGIOU, GEORGIOS, MD Provider ID: 269189 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC	PAPASTERGIOU, GEORGIOS Provider ID: 80983 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2318 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A127706 NPI: 1790054393 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A87650 NPI: 1376723759 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
PEAIRS, JAMES J Provider ID: 126597 Board Certified Specialty: No CALIFORNIA RETINA ASSOCS 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A155296 NPI: 1609135623 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	PEAIRS, JAMES J , MD Provider ID: 268818 Board Certified Specialty: No COMMUNITY CARE IPA LLC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A155296 NPI: 1609135623 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	PONS, MAURICIO E , MD Provider ID: 269242 Board Certified Specialty: No COMMUNITY CARE IPA LLC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A87650 NPI: 1376723759 Provider English Spoken: Yes Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc RAJSBAUM, MARTIN, MD <i>Provider ID:</i> 268749 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 835 3RD AVE STE A CHULA VISTA, CA 91911-1352 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A42670 <i>NPI:</i> 1912999400 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Russian, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc SASSANI, PATRICK P , MD <i>Provider ID:</i> 269076 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	835 3RD AVE STE A CHULA VISTA, CA 91911-1352 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A150205 <i>NPI:</i> 1033411061 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, El Centro Regional Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc SCHER, BARRY M , MD <i>Provider ID:</i> 268828 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 480 4TH AVE STE 201 CHULA VISTA, CA 91910-4412 <i>Phone:</i> (619) 427-3355 <i>Fax:</i> (619) 427-0955 <i>After Hours Phone:</i> (619) 427-3355 <i>Provider Gender:</i> Male <i>License number:</i> G23827 <i>NPI:</i> 1235106899 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHER, BARRY M , MD

Provider ID: 268830

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Male

License number: G23827

NPI: 1235106899

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SKAF, AYHAM R , MD

Provider ID: 269074

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Male

License number: A120584

NPI: 1285888628

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SKAF, AYHAM R

Provider ID: 63195

Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS

835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755

Fax:

After Hours Phone: (619) 425-7755

Provider Gender: Male

License number: A120584

NPI: 1285888628

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

STAINER, GREGORY A , MD

Provider ID: 272892

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

835 3RD AVE STE A
CHULA VISTA, CA 91911-1352

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619) 425-7755

Provider Gender: Male

License number: G41135

NPI: 1295729465

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VADOOTHKER, SAUJANYA, MD

Provider ID: 268635
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
480 4TH AVE STE 201
CHULA VISTA, CA 91910-4412
Phone: (619) 427-3355
Fax: (619) 427-0955
After Hours Phone: (619) 427-3355
Provider Gender: Female
License number: A156489
NPI: 1295170678
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OTOLARYNGOLOGY

JANSEN, CORNELIUS J , MD
Provider ID: 255731
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
577 3RD AVE
CHULA VISTA, CA 91910-5619
Phone: (619) 426-5181
Fax: (619) 426-0714
After Hours Phone: (619) 426-5181
Provider Gender: Male
License number: G85048
NPI: 1285712380
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PATSIAS, ALEXIS, MD
Provider ID: 268806
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
765 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619) 482-0565
Provider Gender: Female
License number: A160436
NPI: 1326452855

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHALCH LEPE, PAUL
Provider ID: 105766
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
765 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax:
After Hours Phone: (619) 482-0565
Provider Gender: Male
License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Alvarado

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D. Directorio de proveedores de atención especializada

Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-4:45PM, SA
9AM-5PM
Website: www.ent-sd.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SCHALCH LEPE, PAUL

Provider ID: 105766
Board Certified Specialty: No
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
765 MEDICAL CENTER CT STE
210
CHULA VISTA, CA 91911-6600
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619)
482-0565
Provider Gender: Male
License number: A92839
NPI: 1558550053
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, German, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital, Sharp
Chula Vista Med Ctr, Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

WOO, LINDA N

Provider ID: 125039
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
321 E ST
CHULA VISTA, CA 91910-2667
Phone: (619) 934-3260
Fax:
After Hours Phone: (619)
934-3260
Provider Gender: Female
License number: A121814
NPI: 1467720656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

PEDIATRICS

FLEMING, SARAH E

Provider ID: 104816
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
435 H ST
CHULA VISTA, CA 91910-4307
Phone: (619) 691-7000
Fax:
After Hours Phone: (619)
691-7000
Provider Gender: Female
License number: A89838
NPI: 1679809826
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TIZNADO, ERNESTO G , MD

Provider ID: 269717
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1635 3RD AVE STE L
CHULA VISTA, CA 91911-5884

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Phone: (619) 425-8901
 Fax: (619) 425-8902
 After Hours Phone: (619) 425-8901
 Provider Gender: Male
 License number: A45183
 NPI: 1568495703
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Arrowhead Regional Medical Center, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Childrens Hosp And Resrch Ctr At Oakland, Parkview Community Hospital Medical Center, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW C
 Provider ID: 257590
 Board Certified Specialty: No
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 344 F ST STE 100
 CHULA VISTA, CA 91910-2645

Phone: (619) 379-6579
 Fax: (619) 501-3846
 After Hours Phone: (619) 379-6579
 Provider Gender: Male
 License number: 20A6842
 NPI: 1295743045
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Fataleka, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

BULLOCK, ANDREW C
 Provider ID: 268443
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 344 F ST STE 100
 CHULA VISTA, CA 91910-2645
 Phone: (619) 379-6579
 Fax: (619) 501-3846
 After Hours Phone: (619) 379-6579
 Provider Gender: Male
 License number: 20A6842
 NPI: 1295743045
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Fataleka, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

LUTFY, PATRICIA M
 Provider ID: 110606
 Board Certified Specialty: No
 SYNOVATION MEDICAL GROUP
 340 4TH AVE STE 19
 CHULA VISTA, CA 91910-3898
 Phone: (619) 761-5308
 Fax:
 After Hours Phone: (619) 761-5308
 Provider Gender: Female
 License number: A133725
 NPI: 1497024061
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PHYSICIANS ASSISTANT

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D. Directorio de proveedores de atención especializada

ALICEA, RAUL C

Provider ID: 268631
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Male
License number: PA54627
NPI: 1275057051
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOLM, TYLER A , NPA

Provider ID: 241021
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (858) 455-7197
After Hours Phone: (619) 425-9510
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LA BERGE-INDA, PRISCILLA S , NPA

Provider ID: 265072
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 450 4TH AVE STE 215
 CHULA VISTA, CA 91910-4428
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
License number: PA54404
NPI: 1679008379
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MACASADIA, MARITES N

Provider ID: 268788
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 752 MEDICAL CENTER CT STE 210
 CHULA VISTA, CA 91911-6660
Phone: (619) 656-0206
Fax: (619) 527-3226
After Hours Phone: (619) 656-0206
Provider Gender: Female
License number: PA15254
NPI: 1093743015
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MERCER, KELLY C

Provider ID: 257505
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 760 OTAY LAKES RD
 CHULA VISTA, CA 91910-6915
Phone: (619) 821-2300
Fax:
After Hours Phone: (619) 821-2300
Provider Gender: Female
License number: PA21625
NPI: 1154609790
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

REVELES, DIANA

Provider ID: 127984
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2325
Fax:
After Hours Phone: (619) 515-2325
Provider Gender: Female
License number: PA19306
NPI: 1548455405
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Rice Fam Hc
IPA:

SOLAI, RADHA S , NPA

Provider ID: 247295
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914-4521
Phone: (619) 482-0300
Fax:
After Hours Phone: (619) 482-0300
Provider Gender: Female
License number: PA54899
NPI: 1245759695
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VARGAS, CHRISTOPHER B , NPA

Provider ID: 268744
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2452 FENTON ST # C203
CHULA VISTA, CA 91914-3599
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
License number: PA55263
NPI: 1922505775
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PODIATRIST

CANABA, YVETTE

Provider ID: 268469
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
345 F ST STE 100
CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481
Provider Gender: Female
License number: DPM5496
NPI: 1821426388
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

CHISHOLM, JOHN A

Provider ID: 125043
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
345 F ST STE 100
CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481
Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility: P, EB, IB, E, R, T, W*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHISHOLM, JOHN A

Provider ID: 268440
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
345 F ST STE 100
CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481

Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility: P, EB, IB, E, R, T, W*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

COLLINS, MICHAEL L

Provider ID: 108899
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
480 4TH AVE STE 501
CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0359
After Hours Phone: (619) 425-9510

Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DAVIDSON, JOHN A

Provider ID: 129545
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
345 F ST STE 100
CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481

Provider Gender: Male
License number: DPM5418
NPI: 1689069874
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LONGOBARDI, JAMES J

Provider ID: 257486
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
450 4TH AVE STE 401
CHULA VISTA, CA 91910-4430
Phone: (619) 425-5500
Fax: (619) 425-5589
After Hours Phone: (619)
425-5500
Provider Gender: Male
License number: DPM3675
NPI: 1780664250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

PUCCINELLI, ALAYNA M

Provider ID: 121352
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
345 F ST STE 100
CHULA VISTA, CA 91910-2632

Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
427-3481
Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PUCCINELLI, ALAYNA M , MD

Provider ID: 268461
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
345 F ST STE 100
CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
427-3481
Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Paradise

Valley Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

XU, DIXON H

Provider ID: 277917
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
345 F ST STE 100
CHULA VISTA, CA 91910-2632
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619)
427-3481
Provider Gender: Male
License number: DPM5596
NPI: 1598296600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Paradise Valley
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

PULMONARY DISEASES		
LIRA, JOSE A <i>Provider ID:</i> 262193 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 841 KUHN DR STE 200 CHULA VISTA, CA 91914-4523 <i>Phone:</i> (619) 482-7301 <i>Fax:</i> (619) 482-7302 <i>After Hours Phone:</i> (619) 482-7301 <i>Provider Gender:</i> Male <i>License number:</i> A33913 <i>NPI:</i> 1356319446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Phone:</i> (619) 363-4000 <i>Fax:</i> (619) 202-9400 <i>After Hours Phone:</i> (616) 363-4000 <i>Provider Gender:</i> Female <i>License number:</i> A48551 <i>NPI:</i> 1609845627 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
		RADIATION ONCOLOGY
LOZANO, MARTHA E , MD <i>Provider ID:</i> 269322 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 841 KUHN DR STE 200 CHULA VISTA, CA 91914-4523	LOZANO, MARTHA E <i>Provider ID:</i> 82696 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 841 KUHN DR STE 200 CHULA VISTA, CA 91914-4523 <i>Phone:</i> (619) 363-4000 <i>Fax:</i> (619) 202-9400 <i>After Hours Phone:</i> (616) 363-4000 <i>Provider Gender:</i> Female <i>License number:</i> A48551 <i>NPI:</i> 1609845627 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	COLEMAN, LORI A , MD <i>Provider ID:</i> 206393 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 769 MEDICAL CENTER CT CHULA VISTA, CA 91911-6602 <i>Phone:</i> (619) 502-5851 <i>Fax:</i> (619) 502-5865 <i>After Hours Phone:</i> (619) 502-5851 <i>Provider Gender:</i> Female <i>License number:</i> G78635 <i>NPI:</i> 1053348920 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD

Provider ID: 220043
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Palomar Health Downtown Campus, Palomar Medical Center, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 204860
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 751 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6617

Phone: (619) 502-5851
Fax:
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 268783
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 769 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar

Medical Center, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MACEWAN, IAIN J

Provider ID: 205875
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 959 LANE AVE STE B
 CHULA VISTA, CA 91914-4528
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

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D. Directorio de proveedores de atención especializada

Rady Childrens Health Network,
Ucsd Medical Group

PEJAVAR, SUNANDA M , MD

Provider ID: 221074
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Female
License number: A103733
NPI: 1912232513
Provider English Spoken: Yes
Provider Language(s) Spoken: Kannada, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

UHL, BARRY M , MD

Provider ID: 243527
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851

Provider Gender: Male
License number: A71969
NPI: 1811936693
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VOLPP, PAUL B , MD

Provider ID: 221102
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: A86307
NPI: 1225186232
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr,

Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD

Provider ID: 200538
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6602
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: A54109
NPI: 1841233947
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADIOLOGY DIAGNOSTIC X-RAY	<i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
ALLEN, DERRICK R <i>Provider ID:</i> 125999 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Male <i>License number:</i> A69840 <i>NPI:</i> 1215982970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	ANDERSON, GREGORY S <i>Provider ID:</i> 125987 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> <i>After Hours Phone:</i> (619) 409-9119 <i>Provider Gender:</i> Male <i>License number:</i> A90018 <i>NPI:</i> 1841467099 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	BAKER, LORI L <i>Provider ID:</i> 125996 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (619) 409-9109 <i>After Hours Phone:</i> (619) 409-9119 <i>Provider Gender:</i> Female <i>License number:</i> G62517 <i>NPI:</i> 1063465219 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
ALLEN, DERRICK R , MD <i>Provider ID:</i> 268362 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (619) 409-9119 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (619) 409-9119	BORSO, MAYA G <i>Provider ID:</i> 126010 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 333 H ST STE 1095	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W

Provider ID: 243267
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital

Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 126017
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-4848
Fax: (619) 409-4849
After Hours Phone: (619) 409-4848
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 126044

Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta, Coast Plaza Hospital, Community Hospital Of Huntington Park, Foothill Regional Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126050
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 409-9119
 Fax: (619) 409-9109
 After Hours Phone: (619) 409-9119
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FIROOZANIA, NILOFAR

Provider ID: 126175
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
 Phone: (619) 409-9119
 Fax:
 After Hours Phone: (619) 409-9119
 Provider Gender: Female
 License number: A109806
 NPI: 1962521419
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Redlands Community Hosp, Barstow Community Hospital, Kindred

Hospital Riverside, Victor Valley
 Global Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

FRANKE, MARK A

Provider ID: 126056
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
 Phone: (619) 409-9119
 Fax:
 After Hours Phone: (619) 409-9119
 Provider Gender: Male
 License number: A118792
 NPI: 1114246329
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HARMAN, SCOTT A

Provider ID: 126070
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
 Phone: (858) 658-6500
 Fax: (619) 409-9109
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: G57284
 NPI: 1124071311
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

IHS RADIOLOGY MEDICAL GROUP INC,

Provider ID: 200460
 Board Certified Specialty:
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
 Phone: (619) 409-9119
 Fax: (619) 409-9109
 After Hours Phone: (619) 409-9119
 Provider Gender:
 License number:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1497148456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JOHNSON, JOHN O

Provider ID: 126082

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL
GROUP INC

333 H ST STE 1095

CHULA VISTA, CA 91910-5557

Phone: (619) 409-9119

Fax: (619) 409-9109

After Hours Phone: (619)
409-9119

Provider Gender: Male

License number: G59632

NPI: 1073565792

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LIZERBRAM, ERIC K

Provider ID: 126094

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL
GROUP INC

333 H ST STE 1095

CHULA VISTA, CA 91910-5557

Phone: (619) 409-9119

Fax: (619) 409-9109

After Hours Phone: (619)
409-9119

Provider Gender: Male

License number: G74959

NPI: 1598718926

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LUBISICH, JOHN P

Provider ID: 126100

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL
GROUP INC

333 H ST STE 1095

CHULA VISTA, CA 91910-5557

Phone: (858) 658-6500

Fax: (619) 409-9109

After Hours Phone: (858)
658-6500

Provider Gender: Male

License number: G77575

NPI: 1194863902

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Scripps Mercy

Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 126121

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL
GROUP INC

333 H ST STE 1095

CHULA VISTA, CA 91910-5557

Phone: (619) 409-9119

Fax: (619) 409-9109

After Hours Phone: (619)
409-9119

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLOUGHLIN, BRIAN J

Provider ID: 126127
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax:
After Hours Phone: (858)
 658-6500
Provider Gender: Male
License number: A120064
NPI: 1972709087
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
 Ucla Med Ctr, Alvarado Hospital
 Llc, Scripps Memorial Hospital,
 Scripps Mercy Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Memorial Hospital
 Encinitas, Scripps Green
 Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 126133

Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (619) 409-9109
After Hours Phone: (858)
 658-6500
Provider Gender: Female
License number: G48800
NPI: 1285685925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Provider ID: 126139
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
 409-9119
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Mercy
 Hospital, El Centro Regional
 Medical Center, Selma
 Community Hospital, Adventist
 Medical Center, Adventist Med
 Ctr Reedley, Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E

Provider ID: 126146
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619)
 409-9119
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126153
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126159
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male

License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUN, ALEX W

Provider ID: 268634
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
435 H ST # 1
CHULA VISTA, CA 91910-4307
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A133334
NPI: 1538502331
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G

Provider ID: 126165
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 126218
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (619) 409-9109
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TSUKADA, GLENN H

Provider ID: 126203
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: A60235
NPI: 1710938394
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Alvarado Hospital Llc, Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 126196
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
333 H ST STE 1095
CHULA VISTA, CA 91910-5557
Phone: (619) 409-9119
Fax: (619) 409-9109
After Hours Phone: (619) 409-9119
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green

Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC

TIEFENBRUN, JONATHAN, MD

Provider ID: 66135
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
340 4TH AVE STE 4
CHULA VISTA, CA 91910-3885
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
License number: G85951
NPI: 1265437727
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DOEMENY, JOHN M

Provider ID: 269755
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269639
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HAWLEY, DANIEL B

Provider ID: 268857
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 751 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6617
Phone: (619) 502-5851
Fax:
After Hours Phone: (619) 502-5851
Provider Gender: Male
License number: A114748
NPI: 1841260353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:

Medical Group(s):
IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 244952
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269533
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 333 H ST STE 1095
 CHULA VISTA, CA 91910-5557
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Provider Gender:</i> Male <i>License number:</i> G51551 <i>NPI:</i> 1508817305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	COMMUNITY CARE IPA LLC 1020 TIERRA DEL REY # A1 CHULA VISTA, CA 91910-7886 <i>Phone:</i> (619) 585-7104 <i>Fax:</i> (619) 585-7106 <i>After Hours Phone:</i> (619) 585-7104 <i>Provider Gender:</i> Male <i>License number:</i> PT291836 <i>NPI:</i> 1033669650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
REGISTERED PHYSICAL THERAPIST		
TENA, ROWENA G , MD <i>Provider ID:</i> 269829 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 333 H ST STE 1095 CHULA VISTA, CA 91910-5557 <i>Phone:</i> (858) 658-6500 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 658-6500 <i>Provider Gender:</i> Female <i>License number:</i> A69607 <i>NPI:</i> 1629029335 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i>	CHANG, ROBERT S <i>Provider ID:</i> 130041 <i>Board Certified Specialty:</i> No SAN DIEGO SPINE AND SPORT INC 1020 TIERRA DEL REY # A1 CHULA VISTA, CA 91910-7886 <i>Phone:</i> (619) 585-7104 <i>Fax:</i> <i>After Hours Phone:</i> (619) 585-7104 <i>Provider Gender:</i> Male <i>License number:</i> PT291836 <i>NPI:</i> 1033669650 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 7AM-6PM, SA 7AM-2PM <i>Website:</i> www.spineandsport.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	DAGOSTINO, JACQUELINE R <i>Provider ID:</i> 243632 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1392 E PALOMAR ST STE 503 CHULA VISTA, CA 91913-1895 <i>Phone:</i> (619) 482-3000 <i>Fax:</i> <i>After Hours Phone:</i> (619) 482-3000 <i>Provider Gender:</i> Female <i>License number:</i> PT295756 <i>NPI:</i> 1710457379 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i>
CHANG, ROBERT S <i>Provider ID:</i> 268910 <i>Board Certified Specialty:</i> No		

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D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DONES, GINA

Provider ID: 268856
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1020 TIERRA DEL REY # A-1
 CHULA VISTA, CA 91910-7886
 Phone: (619) 585-7104
 Fax: (619) 585-7106
 After Hours Phone: (619) 585-7104
 Provider Gender: Female
 License number: PT39455
 NPI: 1316299696
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DORSEY, KYLE T

Provider ID: 286987
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895

Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
 Provider Gender: Male
 License number: PT297329
 NPI: 1790334316
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GEORGE, JENNIFER A

Provider ID: 129014
 Board Certified Specialty: No
 CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2500
 Fax:
 After Hours Phone: (619) 515-2500
 Provider Gender: Female
 License number: PT294245
 NPI: 1215402177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

☞ Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chula Vista Family Hlth Ctr
 IPA:

HASTINGS, NATASHA L

Provider ID: 268895
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1020 TIERRA DEL REY # A1
 CHULA VISTA, CA 91910-7886
 Phone: (619) 585-7104
 Fax:
 After Hours Phone: (619) 585-7104
 Provider Gender: Female
 License number: PT291371
 NPI: 1326395914
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HERMAN, RACHEL

Provider ID: 286656
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895

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D. Directorio de proveedores de atención especializada

Phone: (619) 482-3000

Fax:

After Hours Phone: (619)
482-3000

Provider Gender: Female

License number: PT300507

NPI: 1477121762

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

INTROCASO, BRIANNA L

Provider ID: 268948

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1020 TIERRA DEL REY # A1

CHULA VISTA, CA 91910-7886

Phone: (619) 585-7104

Fax: (619) 585-7106

After Hours Phone: (619)

585-7104

Provider Gender: Female

License number: PT293801

NPI: 1194235218

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KARANDE, PRACHI

Provider ID: 287100

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913-1895

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)

482-3000

Provider Gender: Female

License number: PT300083

NPI: 1699357525

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LANGWORTHY, MATTHEW

Provider ID: 268866

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1020 TIERRA DEL REY # A1

CHULA VISTA, CA 91910-7886

Phone: (619) 585-7104

Fax:

After Hours Phone: (619)

585-7104

Provider Gender: Male

License number: PT294466

NPI: 1750872768

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MARSOLINI, KAYLEIGH A

Provider ID: 268949

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1020 TIERRA DEL REY # A-1

CHULA VISTA, CA 91910-7886

Phone: (619) 585-7104

Fax: (619) 585-7106

After Hours Phone: (619)

585-7104

Provider Gender: Female

License number: PT294481

NPI: 1053810267

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

MORIGEAU, SAMANTHA A

Provider ID: 269051
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1020 TIERRA DEL REY # A1
 CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax:
After Hours Phone: (619) 585-7104
Provider Gender: Female
License number: PT42287
NPI: 1760859268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NOVENCIDO, ANDREW

Provider ID: 286782
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
License number: PT295915
NPI: 1447723937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLIVEROS, YUNNUEN

Provider ID: 268905
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1020 TIERRA DEL REY # A1
 CHULA VISTA, CA 91910-7886
Phone: (619) 585-7104
Fax:
After Hours Phone: (619) 585-7104
Provider Gender: Female
License number: PT294386
NPI: 1295234987
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider ID: 255402
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
License number: PT296953
NPI: 1134774342
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

SANTAMARIA, JENNIFER E

Provider ID: 243544
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax:
After Hours Phone: (619) 482-3000
Provider Gender: Female
License number: PT296313
NPI: 1063978203
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEFFIELD, TIFFANY

Provider ID: 255402
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
License number: PT296953
NPI: 1134774342
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SPARKS, TODD M

Provider ID: 129142
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913-1895
Phone: (619) 482-3000
Fax:
After Hours Phone: (619)
 482-3000
Provider Gender: Male
License number: PT30298
NPI: 1265481139
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: 204158
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE
 216

CHULA VISTA, CA 91911-6600
Phone: (619) 623-3000
Fax: (619) 623-3001
After Hours Phone: (619)
 623-3000
Provider Gender: Female
License number: A97619
NPI: 1871718189
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

CHITKARA, PUJA

Provider ID: 262358
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 765 MEDICAL CENTER CT STE
 216
 CHULA VISTA, CA 91911-6600
Phone: (619) 623-3000
Fax: (619) 623-3001
After Hours Phone: (619)
 623-3000
Provider Gender: Female
License number: A97619
NPI: 1871718189
Provider English Spoken: Yes
Provider Language(s) Spoken:

Hindi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

CHWA, JEFFREY K , MD

Provider ID: 268780
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 765 MEDICAL CENTER CT STE
 216
 CHULA VISTA, CA 91911-6600
Phone: (619) 623-3000
Fax: (619) 623-3001
After Hours Phone: (619)
 623-3000
Provider Gender: Male
License number: 20A14736
NPI: 1285989236
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Sharp Chula
 Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KOTHA, AKTHER J

Provider ID: 53697
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
374 H ST STE 103
CHULA VISTA, CA 91910-5547
Phone: (619) 205-0120
Fax: (619) 229-1109
After Hours Phone: (619) 205-0120
Provider Gender: Female
License number: A45440
NPI: 1780609503
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Hindi, Spanish, Telugu, Urdu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REDDY, DANA A

Provider ID: 262363
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
272 CHURCH AVE STE 1
CHULA VISTA, CA 91910-2718

Phone: (619) 427-1721
Fax: (619) 427-1235
After Hours Phone: (619) 427-1721
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SURGERY GENERAL **VASCULAR**

SALLOUM, ALEXANDER C , MD

Provider ID: 268764
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1111 BROADWAY STE 305
CHULA VISTA, CA 91911-2700
Phone: (619) 567-7007
Fax: (619) 567-7775
After Hours Phone: (619) 567-7007
Provider Gender: Male
License number: A89300
NPI: 1124176151

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital, Palomar Medical Center, Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

ARCOVEDO, RODOLFO

Provider ID: 217834
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
786 3RD AVE STE B
CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: C51718
NPI: 1225018880
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

BARRERA, HUGO H

Provider ID: 27172
Board Certified Specialty: No
 COAST SURGICAL GROUP
 786 3RD AVE STE B
 CHULA VISTA, CA 91910-5826
Phone: (619) 425-0797
Fax: (619) 425-0596
After Hours Phone: (619) 425-0797
Provider Gender: Male
License number: G79280
NPI: 1043299100
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Imperial Health Holdings Medical Group-Sd

HSU, ANDREW S

Provider ID: 53785
Board Certified Specialty: No
 SOUTH BAY SURGICAL ASSOCS MED GRP
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910-4413
Phone: (619) 425-7470
Fax:
After Hours Phone: (619) 425-7470
Provider Gender: Male
License number: A108956
NPI: 1083817399
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M,W,TH 8AM-5PM, TU,F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

HSU, ANDREW S , MD

Provider ID: 53785
Board Certified Specialty: No
 SOUTH BAY SURGICAL ASSOCS MED GRP
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910-4413

Phone: (619) 425-4559
Fax: (619) 425-7472
After Hours Phone: (619) 425-4559
Provider Gender: Male
License number: A108956
NPI: 1083817399
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

HSU, BRADFORD T , MD

Provider ID: 53792
Board Certified Specialty: No
 SOUTH BAY SURGICAL ASSOCS MED GRP
 480 4TH AVE STE 404
 CHULA VISTA, CA 91910-4413
Phone: (619) 425-4559
Fax: (619) 425-7472
After Hours Phone: (619) 425-4559
Provider Gender: Male
License number: A86179
NPI: 1912968389
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HSU, BRADFORD T

Provider ID: 53792

Board Certified Specialty: No

SOUTH BAY SURGICAL

ASSOCS MED GRP

480 4TH AVE STE 404

CHULA VISTA, CA 91910-4413

Phone: (619) 425-7470

Fax: (619) 425-7472

After Hours Phone: (619)

425-7470

Provider Gender: Male

License number: A86179

NPI: 1912968389

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital, Paradise Valley

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M,W,TH 8AM-5PM, TU,F

8AM-4PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SUMMERS, STEPHEN T

Provider ID: 27708

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: G70943

NPI: 1174502223

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Paradise Valley Hospital,

Scripps Mercy Hospital, Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

YANG, YIFAN

Provider ID: 262296

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

786 3RD AVE STE B

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 827-0400

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Scripps Mercy Hospital Chula

Vista, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

YANG, YIFAN

Provider ID: 83019

Board Certified Specialty: No

COAST SURGICAL GROUP

786 3RD AVE

CHULA VISTA, CA 91910-5826

Phone: (619) 425-0797

Fax: (619) 425-0596

After Hours Phone: (619)

425-0797

Provider Gender: Male

License number: A109921

NPI: 1114188539

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SURGERY ORTHOPEDIC

BAGHERI, ALI

Provider ID: 117911
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619) 425-9510
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd
KIMBALL, MICHAEL P
Provider ID: 262112
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (858) 455-6460
Fax: (619) 425-0539
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KIMBALL, MICHAEL P , MD
Provider ID: 268619
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (858) 455-6460
Fax: (619) 425-0539
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROSENFELD, ALAN L , MD
Provider ID: 242937
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619) 425-9510

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G75293
NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROSENFELD, ALAN L , MD
Provider ID: 242939
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 509
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax:
After Hours Phone: (619) 425-9510
Provider Gender: Male
License number: G75293
NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps

Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROSENFELD, ALAN L
Provider ID: 262176
Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619) 425-9510
Provider Gender: Male
License number: G75293
NPI: 1588648968
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

TAYYAB, NEIL A , MD
Provider ID: 268616
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619) 425-9510

Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

TAYYAB, NEIL A
Provider ID: 66253

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 480 4TH AVE STE 501
 CHULA VISTA, CA 91910-4414
Phone: (619) 425-9510
Fax: (619) 425-0539
After Hours Phone: (619) 425-9510
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SURGERY THORACIC

HUANG, MARK W
Provider ID: 27348
Board Certified Specialty: No
OPERATION SAMAHAN INC
 765 MEDICAL CENTER CT STE 216
 CHULA VISTA, CA 91911-6600

Phone: (619) 421-1111
Fax: (619) 421-1504
After Hours Phone: (619) 421-1111
Provider Gender: Male
License number: A74711
NPI: 1730185760
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Grossmont Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUANG, MARK W
Provider ID: 27348
Board Certified Specialty: No
CVTS MEDICAL GROUP INC
 765 MEDICAL CENTER CT STE 216
 CHULA VISTA, CA 91911-6600
Phone: (619) 421-1111
Fax: (619) 421-1504
After Hours Phone: (619) 421-1111
Provider Gender: Male
License number: A74711
NPI: 1730185760
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Sharp Chula

Vista Med Ctr, Grossmont Hospital, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

UROLOGY

SEVILLA, CLAUDIA
Provider ID: 283157
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 750 MEDICAL CENTER CT STE 14
 CHULA VISTA, CA 91911-6634
Phone: (619) 397-4500
Fax: (858) 429-7931
After Hours Phone: (619) 397-4500
Provider Gender: Female
License number: A131270
NPI: 1689081275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/105
American Sign Language (ASL): No
 ☞ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CORONADO

ALLERGY IMMUNOLOGY

COHEN, GARY A

Provider ID: 206022

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

230 PROSPECT PL STE 340D
CORONADO, CA 92118-1993

Phone: (858) 458-0940

Fax: (858) 458-3688

After Hours Phone: (858)
458-0940

Provider Gender: Male

License number: G43070

NPI: 1346424462

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Rady Childrens Hospital San
Diego, Pomerado Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FAMILY PRACTICE

SWEET, PATRICK H

Provider ID: 270722

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
131 ORANGE AVE # 101
CORONADO, CA 92118-1408

Phone: (619) 964-9649

Fax: (619) 996-2014

After Hours Phone: (619)

964-9649

Provider Gender: Male

License number: A101827

NPI: 1457407702

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Hoag Hospital

Irvine, Scripps Mercy Hospital

Chula Vista, Grossmont Hospital,

Scripps Memorial Hospital,

Desert Regional Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GASTROENTEROLOGY

LAJIN, MICHAEL, MD

Provider ID: 269837

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
230 PROSPECT PL # 220
CORONADO, CA 92118-1978

Phone: (619) 460-4055

Fax:

After Hours Phone: (619)
460-4055

Provider Gender: Male

License number: C53475

NPI: 1467411702

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, German, Japanese,
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Sharp Coronado Hosp
And Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE L, MD

Provider ID: 268655

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
801 ORANGE AVE
CORONADO, CA 92118-2663

Phone: (619) 437-8154

Fax: (310) 989-3092

After Hours Phone: (619)
437-8154

Provider Gender: Female

License number: HA6083

NPI: 1902853344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INTERNAL MEDICINE

DAVIS, JASON T , MD

Provider ID: 270966
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Kindred Hospital San Diego,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego,
 Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

NEPHROLOGY

DAVIS, JASON T

Provider ID: 83879
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Kindred Hospital San Diego,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego,
 Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical
 Group-Sd

HAMMES, JOHN S

Provider ID: 262326
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 230 PROSPECT PL STE 340B
 CORONADO, CA 92118-1991
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
 299-2350
Provider Gender: Male
License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Kindred Hospital San Diego,
 Vibra Hospital Of San Diego,
 Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

PEDIATRIC ALLERGY / IMMUNOLOGY

COHEN, GARY A

Provider ID: 242806

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 230 PROSPECT PL # 220
 CORONADO, CA 92118-1978
Phone: (858) 458-0940
Fax: (858) 458-3688
After Hours Phone: (858) 458-0940
Provider Gender: Male
License number: G43070
NPI: 1346424462
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

UROLOGY

ROBERTS, JAMES L
Provider ID: 257532
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 230 PROSPECT PL # 300
 CORONADO, CA 92118-1978

Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670
Provider Gender: Male
License number: G59945
NPI: 1508972191
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

EL CAJON

CERTIFIED NURSE PRACTITIONER

PARK, SUN MIN
Provider ID: 277908
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY, STE 100
 EL CAJON, CA 92022
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female

License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

SAMUEL, MICHAEL A , MD
Provider ID: 268595
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 255 W MADISON AVE # 1
 EL CAJON, CA 92020
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Huntington Memorial Hospital, Desert Regional Med Ctr, Eisenhower Medical Ctr, Pioneers Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ESCONDIDO

PHYSICIANS ASSISTANT

CLARK, YVONNE L

Provider ID: 260065

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 CITRACADO PKWY # 206

ESCONDIDO, CA 92025

Phone: (760) 755-7600

Fax: (760) 294-9274

After Hours Phone: (760)

755-7600

Provider Gender: Female

License number: PA20447

NPI: 1629302476

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

EL CAJON

CARDIOLOGY

KAFRI, HASSAN, MD

Provider ID: 209019

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

328 HIGHLAND AVE # 200

EL CAJON, CA 92020-5207

Phone: (619) 930-9404

Fax: (619) 930-9426

After Hours Phone: (619)

930-9404

Provider Gender: Male

License number: A96002

NPI: 1730258401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Grossmont Hospital,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

PONCE, SONIA G

Provider ID: 268703

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

328 HIGHLAND AVE # 200

EL CAJON, CA 92020-5207

Phone: (619) 930-9404

Fax: (619) 930-9426

After Hours Phone: (619)

930-9404

Provider Gender: Female

License number: A145008

NPI: 1164659033

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista,

Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHARF, ALBERT J , MD

Provider ID: 269167

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1240 BROADWAY STE 210

EL CAJON, CA 92021-4947

Phone: (619) 470-7700

Fax: (619) 900-4589

After Hours Phone: (619)

470-7700

Provider Gender: Male

License number: G72122

NPI: 1649349820

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Paradise Valley

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital, Scripps Mercy Hospital,

Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Phone:</i> (760) 737-6960 <i>Fax:</i> <i>After Hours Phone:</i> (760) 737-6960 <i>Provider Gender:</i> Female <i>License number:</i> NP95008776 <i>NPI:</i> 1932606118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No Accessibility: <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
CERTIFIED NURSE PRACTITIONER		
BRANNEN, MANDY M , NPA <i>Provider ID:</i> 241600 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 215 W MADISON AVE EL CAJON, CA 92020-3405 <i>Phone:</i> (619) 401-6236 <i>Fax:</i> <i>After Hours Phone:</i> (619) 401-6236 <i>Provider Gender:</i> Female <i>License number:</i> NP95007286 <i>NPI:</i> 1891205159 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No Accessibility: <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	GRIMM, HANA R <i>Provider ID:</i> 261035 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 250 E CHASE AVE # 108 EL CAJON, CA 92020-6305 <i>Phone:</i> (619) 442-2560 <i>Fax:</i> (619) 442-7836 <i>After Hours Phone:</i> (619) 442-2560 <i>Provider Gender:</i> Female <i>License number:</i> NP22474 <i>NPI:</i> 1831463751 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No Accessibility:	KING, PAILAI I <i>Provider ID:</i> 104067 <i>Board Certified Specialty:</i> No ZAVARO CARDIOVASCULAR INST A MED CORP 300 S PIERCE ST # 102 EL CAJON, CA 92020-4124 <i>Phone:</i> (619) 668-4700 <i>Fax:</i> <i>After Hours Phone:</i> (619) 668-4700 <i>Provider Gender:</i> Female <i>License number:</i> NP23405 <i>NPI:</i> 1497187090 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No Accessibility: P, EB, IB, E, R, W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
CHUDACEK, JANET M , MD <i>Provider ID:</i> 241626 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 215 W MADISON AVE EL CAJON, CA 92020-3405		LEE, PATRICIA Y <i>Provider ID:</i> 283570 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 844 JACKMAN ST EL CAJON, CA 92020-3053

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 442-2560
 Fax: (619) 442-7836
 After Hours Phone: (619) 442-2560
 Provider Gender: Female
 License number: NP23807
 NPI: 1710309695
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LEONARD, BEVERLY S
 Provider ID: 115081
 Board Certified Specialty: No
 CHASE AVENUE FAMILY HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Provider Gender: Female
 License number: NP10943
 NPI: 1285772392
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chase Avenue Family Health Ctrs Inc
 IPA:

MANGENE, CYNTHIA L
 Provider ID: 25690
 Board Certified Specialty: No
 CHASE AVENUE FAMILY HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Provider Gender: Female
 License number: NP6782
 NPI: 1548292626

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chase Avenue Family Health Ctrs Inc
 IPA:

MANGENE, CYNTHIA L
 Provider ID: 25690
 Board Certified Specialty: No
 VISTA COMMUNITY CLNC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Provider Gender: Female
 License number: NP6782
 NPI: 1548292626
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chase Avenue Family Health Ctrs Inc
 IPA:

OCHOA, ERLINDA A
 Provider ID: 116673
 Board Certified Specialty: No
 LA MAESTRA CHC EL CAJON BROADWAY
 1032 BROADWAY
 EL CAJON, CA 92021-7416
 Phone: (619) 795-5991
 Fax:
 After Hours Phone: (619) 795-5991
 Provider Gender: Female
 License number: NP4430
 NPI: 1346437464
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.lamaestra.org
Email:
Medical Group(s): La Maestra Chc El Cajon Broadway
IPA:

PARNELL, TANIKA E

Provider ID: 287649
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 844 JACKMAN ST
 EL CAJON, CA 92020-3053
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Provider Gender: Female
License number: NP95013165
NPI: 1679121750
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PIRTLE, KEYSHONE D

Provider ID: 284244
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 5442 SYCUAN RD
 EL CAJON, CA 92019-1816

Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Male
License number: NP95247697
NPI: 1417567827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SWAN, MELANIE A

Provider ID: 89923
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: NP95000818
NPI: 1871934414
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

VILLANUEVA DE GUTIE, BERENICE

Provider ID: 115614
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795
Phone: (619) 312-0347
Fax:
After Hours Phone: (619) 312-0347
Provider Gender: Female
License number: NP95002188
NPI: 1952795536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website: www.lamaestra.org
Email:
Medical Group(s): La Maestra Family Clinic Inc
IPA:

WILLIAMS, BREAHA A

Provider ID: 115128
Board Certified Specialty: No
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
 EL CAJON, CA 92019-4795

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 312-0347
 Fax:
 After Hours Phone: (619) 312-0347
 Provider Gender: Female
 License number: NP95001840
 NPI: 1063884864
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website: www.lamaestra.org
 Email:
 Medical Group(s): La Maestra Family Clinic Inc
 IPA:

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc
CELANO, NICHOLAS J
 Provider ID: 102191
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 749-6174
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: A120411
 NPI: 1457662264

Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax:
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: A120411
 NPI: 1457662264
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DERMATOLOGY

BROGAN, JACQUELINE L , MD
 Provider ID: 265251
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 267-4385
 After Hours Phone: (619) 579-5115
 Provider Gender: Female
 License number: A160890
 NPI: 1801273479
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CELANO, NICHOLAS J
 Provider ID: 102191

CELANO, NICHOLAS J , MD
 Provider ID: 269114
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 749-6174
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: A120411
 NPI: 1457662264

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107659
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107659
Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHIANG, JENNIFER Y , MD

Provider ID: 269156
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604

Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269669
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Male
License number: A134188
NPI: 1962836783
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

KASSAB, GHADA K , MD

Provider ID: 129190
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 330 S MAGNOLIA AVE
 EL CAJON, CA 92020-5290
 Phone: (858) 273-2726
 Fax: (858) 273-2725
 After Hours Phone: (858) 273-2726
 Provider Gender: Female
 License number: A114457
 NPI: 1023278504
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RESH, WILLIAM F , MD

Provider ID: 269099
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 267-4835
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: C34661
 NPI: 1154309862
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RESH, WILLIAM F

Provider ID: 38883
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 749-6174
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: C34661
 NPI: 1154309862
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RESH, WILLIAM F

Provider ID: 38883
 Board Certified Specialty: No
 WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 292 AVOCADO AVE
 EL CAJON, CA 92020-4604
 Phone: (619) 579-5115
 Fax: (619) 267-4835
 After Hours Phone: (619) 579-5115
 Provider Gender: Male
 License number: C34661
 NPI: 1154309862
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SATEESH, BROOKE R , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269154
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SATEESH, BROOKE R

Provider ID: 83559
Board Certified Specialty: No
WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 267-4835
After Hours Phone: (619) 579-5115
Provider Gender: Female

License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SATEESH, BROOKE R

Provider ID: 83559
Board Certified Specialty: No
WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax: (619) 749-6174
After Hours Phone: (619) 579-5115
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

UEBELHOER, NATHAN S

Provider ID: 125012
Board Certified Specialty: No
WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
292 AVOCADO AVE
EL CAJON, CA 92020-4604
Phone: (619) 579-5115
Fax:
After Hours Phone: (619) 579-5115
Provider Gender: Male
License number: 20A9328
NPI: 1659344513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical

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D. Directorio de proveedores de atención especializada

Group-Sd

UEBELHOER, NATHAN S

Provider ID: 125012

Board Certified Specialty: No

WILLIAM F RESH MD SKIN

AND SKIN CANCER MED GRP

292 AVOCADO AVE

EL CAJON, CA 92020-4604

Phone: (619) 579-5115

Fax: (619) 749-7174

After Hours Phone: (619)

579-5115

Provider Gender: Male

License number: 20A9328

NPI: 1659344513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Naval Medical
Ctr Sd Rbe

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical
Group-Sd

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Male

License number: 20A15471

NPI: 1649699968

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8:30AM-5:30PM, SA

9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

AL ANI, NAJWAN N

Provider ID: 122626

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Female

License number: A144974

NPI: 1275948473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8:30AM-5:30PM, SA

9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

BROWN, BRANDON S

Provider ID: 127590

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Male

License number: A148499

NPI: 1013399559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8:30AM-5:30PM, SA

9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-El Cajon

IPA:

CORMAN, DANIEL M

FAMILY PRACTICE

ABDALLAH, ALI H

Provider ID: 120060

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

AL ANI, NAJWAN N

Provider ID: 122626

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2498

Fax:

After Hours Phone: (619)

515-2498

Provider Gender: Female

License number: A144974

NPI: 1275948473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Provider ID: 128275
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

GORDON, CHRISTOPHER J

Provider ID: 110772
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: A83390
NPI: 1477711521

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

HASTANAN, CAROL L

Provider ID: 98429
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: A110192
NPI: 1861648461

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc

IPA:

LIN, SHUANG

Provider ID: 122471
Board Certified Specialty: No
CHASE AVENUE FAMILY HEALTH CTRS INC
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499

Provider Gender: Female
License number: A138887
NPI: 1689093684
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue Family Health Ctrs Inc
IPA:

IAZI, HARRIS O

Provider ID: 122797
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A146111
 NPI: 1174905871
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr San Diego-El Cajon
 IPA:

THIERMANN, PAIGE A

Provider ID: 62295
 Board Certified Specialty: No
 NEIGHBORHOOD HEALTHCARE EL CAJON
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Provider Gender: Female
 License number: A114779
 NPI: 1134411432
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Kurdish, Spanish, Syriac
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA

9AM-5PM
 Website: www.ihsocal.org
 Email:
 Medical Group(s): Neighborhood Healthcare El Cajon
 IPA:

GASTROENTEROLOGY

CUBAS, IVAN P

Provider ID: 120211
 Board Certified Specialty: No
 DIGESTIVE DISEASE ASSOCS INC
 2732 NAVAJO RD STE 201
 EL CAJON, CA 92020-2149
 Phone: (619) 266-3332
 Fax: (619) 266-6000
 After Hours Phone: (619) 266-3332
 Provider Gender: Male
 License number: C55825
 NPI: 1447464912
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

CUBAS, IVAN P

Provider ID: 120211
 Board Certified Specialty: No
 DIGESTIVE DISEASE ASSOCS INC
 2732 NAVAJO RD STE 201
 EL CAJON, CA 92020-2149
 Phone: (619) 266-3332
 Fax:
 After Hours Phone: (619) 266-3332
 Provider Gender: Male
 License number: C55825
 NPI: 1447464912
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.3dcinc.com
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

HASSANEIN, TAREK I, MD

Provider ID: 269556
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 463 N MAGNOLIA AVE
 EL CAJON, CA 92020-3606
 Phone: (619) 522-0399
 Fax: (619) 749-3295
 After Hours Phone: (619) 522-0399

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Alvarado Hospital Llc, Hoag Hospital Irvine
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

IMPERIAL, JOANNE C , MD
Provider ID: 268979
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 465 N MAGNOLIA AVE
 EL CAJON, CA 92020-3606
Phone: (619) 359-8380
Fax: (619) 359-8360
After Hours Phone: (619) 359-8380
Provider Gender: Female
License number: G44420
NPI: 1225101884
Provider English Spoken: Yes
Provider Language(s) Spoken:

French, Spanish
Cultural Competency: No
Hospital Affiliation: Lucile Salter Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHAEFFER, CYNTHIA L
Provider ID: 120290
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2732 NAVAJO RD STE 201
 EL CAJON, CA 92020-2149
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Female
License number: A91771
NPI: 1740352293
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD
Provider ID: 268692
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219
Phone: (619) 440-6516
Fax: (619) 440-6547
After Hours Phone: (619) 440-6516
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DANDURAND, JOHN M , MD
Provider ID: 269780
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 440-6516
 Fax: (619) 440-6547
 After Hours Phone: (619) 440-6516
 Provider Gender: Male
 License number: HA2056
 NPI: 1497901680
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DAVIS, KELLE L , MD

Provider ID: 268650
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1767 E MAIN ST
 EL CAJON, CA 92021-5219
 Phone: (619) 440-6516
 Fax: (619) 440-6547
 After Hours Phone: (619) 440-6516
 Provider Gender: Female
 License number: HA6083
 NPI: 1902853344
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE

DUONG, MAI T

Provider ID: 114973
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619) 515-2498
 Provider Gender: Female
 License number: A127798
 NPI: 1629339304
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

GORGES, RANDA A

Provider ID: 122495
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST

EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619) 515-2498
 Provider Gender: Female
 License number: A138815
 NPI: 1285079509
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

SIHOTA, GURPREET

Provider ID: 121259
 Board Certified Specialty: No
 CHASE AVENUE FAMILY
 HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax:
 After Hours Phone: (619) 515-2499
 Provider Gender: Female
 License number: 20A13700
 NPI: 1659715852
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Chase Avenue
 Family Health Ctrs Inc
 IPA:

BUECHNER, CHARLENE A
 Provider ID: 127433
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:

Phone: (310) 825-9945
 Fax:
 After Hours Phone: (310)
 825-9945
 Provider Gender: Male
 License number: A133994
 NPI: 1912249004
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald
 Reagan UCLA Med Ctr, Santa
 Monica UCLA Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A
 Provider ID: 114824
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Provider Gender: Female
 License number: 20A14919
 NPI: 1619397031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

After Hours Phone: (619)
 515-2498
 Provider Gender: Female
 License number: A68463
 NPI: 1376663831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Sharp Mary
 Birch Hosp For Women And
 Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

CARTER, KHALIL J
 Provider ID: 127377
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Provider Gender: Male
 License number: A113001
 NPI: 1225231582
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes

BUKOWSKI, KYLE C
 Provider ID: 269037
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1685 E MAIN ST STE 301
 EL CAJON, CA 92021-5292

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

CERVANTES, SANDRA M
 Provider ID: 114871
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Provider Gender: Female
 License number: A118095
 NPI: 1073701041
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Coronado Hosp
 And Healthcare Ctr, Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon

IPA:
**FOLCH TORRES-AGUIAR,
 BEATRIZ M**
 Provider ID: 120511
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Provider Gender: Female
 License number: A148014
 NPI: 1457794752
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr
 San Diego-El Cajon
 IPA:

KHAN, ALIYA I
 Provider ID: 109641
 Board Certified Specialty: No
 LA MAESTRA CHC EL CAJON
 BROADWAY
 1032 BROADWAY
 EL CAJON, CA 92021-7416

Phone: (619) 795-5991
 Fax:
 After Hours Phone: (619)
 795-5991
 Provider Gender: Female
 License number: G50634
 NPI: 1285687350
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Urdu
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
 Website: www.lamaestra.org
 Email:
 Medical Group(s): La Maestra
 Chc El Cajon Broadway
 IPA:

LIPSCHITZ, LISA S
 Provider ID: 115429
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619)
 515-2498
 Provider Gender: Female
 License number: A72005
 NPI: 1649208711
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy

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D. Directorio de proveedores de atención especializada

Hospital, Grossmont Hospital,
Sharp Coronado Hosp And
Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

LOEFFLER, ALLISON M

Provider ID: 115562
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Female
License number: A116680
NPI: 1700073962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM

Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 115040
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130083
Board Certified Specialty: No
FAMILY HLTH CTR SAN

DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-El Cajon
IPA:

WINESBURG, JENNIFER J

Provider ID: 114806
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619)
515-2498
Provider Gender: Female
License number: 20A11535
NPI: 1811162456

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

ZIEG, ALAN J

Provider ID: 114825
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-El Cajon
IPA:

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 114628
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2498
Fax:
After Hours Phone: (619) 515-2498
Provider Gender: Male
License number: A107093
NPI: 1588825129
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr

San Diego-El Cajon
IPA:

BINDER, NICHOLAS R , MD

Provider ID: 268752
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax:
After Hours Phone: (619) 440-5400
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MCGRAW, JOSEPH P , MD

Provider ID: 269703
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262441
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 68144
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS MED GRP
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 107940
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS MED GRP
 450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 697-2410
After Hours Phone: (619) 440-5400
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE

Provider ID: 262318
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Arabic, Gujarati, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Paradise Valley
Hospital, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, GITANE, MD

Provider ID: 268740
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Gujarati, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Paradise Valley
Hospital, Scripps Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, SARJAN H

Provider ID: 262403
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital,
Scripps Memorial Hospital,
Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, SARJAN H , MD

Provider ID: 268799
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish,
Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital,
Scripps Memorial Hospital,
Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PRABHU, SUJATA P

Provider ID: 262390
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD
 Provider ID: 268917
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 License number: A115965
 NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PEDIATRICS

KODSI, ALICIA M
 Provider ID: 120082
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2498
 Fax:
 After Hours Phone: (619) 515-2498
 Provider Gender: Female
 License number: A147976
 NPI: 1932514353
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

♿ Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr San Diego-El Cajon
 IPA:

LYNN, JOHN G
 Provider ID: 24744
 Board Certified Specialty: No
 NEIGHBORHOOD HEALTHCARE EL CAJON
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (760) 742-2782
 Fax:
 After Hours Phone: (760) 742-2782
 Provider Gender: Male
 License number: A87637
 NPI: 1891729968

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website: www.ihpsocal.org
 Email:
 Medical Group(s): Neighborhood Healthcare El Cajon
 IPA:

PHYSICIANS ASSISTANT

LA BERGE-INDA, PRISCILLA S , NPA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 265073
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 328 HIGHLAND AVE # 200
 EL CAJON, CA 92020-5207
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619) 930-9404
Provider Gender: Female
License number: PA54404
NPI: 1679008379
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/110
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LAPINA, LORI L

Provider ID: 77854
Board Certified Specialty: No
 CHASE AVENUE FAMILY
 HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: PA23231
NPI: 1245670413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
 Family Health Ctrs Inc
IPA:

PATEL, SHREYA M

Provider ID: 48965
Board Certified Specialty: No
 CHASE AVENUE FAMILY
 HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Female
License number: PA18719
NPI: 1447468137
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
 Family Health Ctrs Inc
IPA:

TURNER, ERIC M

Provider ID: 121894
Board Certified Specialty: No
 CHASE AVENUE FAMILY
 HEALTH CTRS INC
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax:
After Hours Phone: (619) 515-2499
Provider Gender: Male
License number: PA55067
NPI: 1669756128
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Chase Avenue
 Family Health Ctrs Inc
IPA:

PODIATRIST

FARMER, STEVEN G

Provider ID: 268976
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax: (858) 633-4692
After Hours Phone: (619) 440-2751
Provider Gender: Male
License number: DPM2895
NPI: 1215087770
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VALLONE, MELCHIOR P

Provider ID: 204673
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5442 SYCUAN RD
EL CAJON, CA 92019-1816
Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Male
License number: DPM2201
NPI: 1093998965
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

MILLER, RICHARD J

Provider ID: 269763
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1625 E MAIN ST STE 100
EL CAJON, CA 92021-5240
Phone: (619) 376-1082
Fax:
After Hours Phone: (619) 376-1082
Provider Gender: Male
License number: PT22474
NPI: 1255638979
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANTIAGO, ALICIA L

Provider ID: 269688
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1625 E MAIN ST STE 104
EL CAJON, CA 92021-5223
Phone: (619) 873-2160
Fax: (619) 873-2168
After Hours Phone: (619) 873-2160
Provider Gender: Female

License number: PT292418
NPI: 1497297964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

AVULOV, VADIM

Provider ID: 125016
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
671 S MOLLISON AVE
EL CAJON, CA 92020-6682
Phone: (619) 386-6637
Fax: (619) 825-3406
After Hours Phone: (619) 386-6637
Provider Gender: Male
License number: 20A13344
NPI: 1700121472
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd	ALLERGY IMMUNOLOGY LAUBACH, SUSAN S Provider ID: 53685 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 Phone: (760) 944-6377 Fax: (760) 755-7699 After Hours Phone: (760) 944-6377 Provider Gender: Female License number: A114061 NPI: 1366656209 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 Phone: (858) 966-6377 Fax: (760) 944-3927 After Hours Phone: (858) 966-6377 Provider Gender: Male License number: G34844 NPI: 1699794222 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/99 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
AVULOV, VADIM Provider ID: 262163 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1580 N 2ND ST EL CAJON, CA 92021-3447 Phone: (619) 396-6637 Fax: (619) 825-3406 After Hours Phone: (619) 396-6637 Provider Gender: Male License number: 20A13344 NPI: 1700121472 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd	WELCH, MICHAEL J Provider ID: 206202 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	ANESTHESIOLOGY PAIN MANAGEMENT FISHER, CASEY J Provider ID: 269185 Board Certified Specialty: No COMMUNITY CARE IPA LLC 326 ENCINITAS BLVD STE 100 ENCINITAS, CA 92024-8703 Phone: (619) 825-8511 Fax: (858) 726-6291 After Hours Phone: (619) 825-8511 Provider Gender: Male License number: A118592 NPI: 1275780686 Provider English Spoken: Yes

ENCINITAS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARDIOLOGY

HOFFMAYER, KURT S
Provider ID: 118218
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 477 N EL CAMINO REAL # B300
 ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax:
After Hours Phone: (760) 634-8273
Provider Gender: Male
License number: A98256
NPI: 1841322195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:
NARAYAN, HARI K
Provider ID: 239115
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A144821
NPI: 1376705707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CARDIOVASCULAR DISEASE

FELD, GREGORY K
Provider ID: 64680
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 477 N EL CAMINO REAL # B300

ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax: (619) 543-7418
After Hours Phone: (760) 634-8273
Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TAUB, PAM R
Provider ID: 64683
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 477 N EL CAMINO REAL # B300
 ENCINITAS, CA 92024-1328
Phone: (760) 634-8273
Fax:
After Hours Phone: (760) 634-8273
Provider Gender: Female
License number: A89612
NPI: 1346355161
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ Z , NPA

Provider ID: 265370
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 D308
 ENCINITAS, CA 92024-1370
 Phone: (760) 436-2300
 Fax: (760) 436-5482
 After Hours Phone: (760)
 436-2300
 Provider Gender: Female
 License number: NP95010956
 NPI: 1083276273
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Kurdish, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ELAMPARO, KAYE L , NPA

Provider ID: 258927

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 D200
 ENCINITAS, CA 92024-1375
 Phone: (760) 452-3340
 Fax: (760) 452-3344
 After Hours Phone: (760)
 452-3340
 Provider Gender: Female
 License number: NP20795
 NPI: 1851673610
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Green Hospital, Scripps
 Mercy Hospital, Alvarado Hosp
 Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FAIQ, JAMILA, NPA

Provider ID: 254824
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 D200
 ENCINITAS, CA 92024-1375

Phone: (760) 452-3340
 Fax:
 After Hours Phone: (760)
 452-3340
 Provider Gender: Female
 License number: NP95004759
 NPI: 1518414366
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/120
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FRANZ, CORTNEY D , NPA

Provider ID: 253241
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 D200
 ENCINITAS, CA 92024-1375
 Phone: (760) 452-3340
 Fax: (760) 452-3344
 After Hours Phone: (760)
 452-3340
 Provider Gender: Female
 License number: NP95004258
 NPI: 1174077507
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 16/120

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HEAD, KRISTIN N

Provider ID: 126782

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

477 N EL CAMINO REAL

ENCINITAS, CA 92024-1328

Phone: (760) 944-5545

Fax:

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: NP20264

NPI: 1699078923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HEAD, KRISTIN N

Provider ID: 268657

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: NP20264

NPI: 1699078923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HOOPER, BONNIE J , NPA

Provider ID: 275253

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

477 N EL CAMINO REAL STE D308

ENCINITAS, CA 92024-1370

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)

436-2300

Provider Gender: Female

License number: NP6495

NPI: 1821062878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KORMANIK, PATRICIA A

Provider ID: 282071

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP9707

NPI: 1093895047

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

LEVY, SHARON B

Provider ID: 262167
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545

Fax:
After Hours Phone: (760) 944-5545

Provider Gender: Female
License number: NP95003383
NPI: 1316396807

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MWAURA, WAIRIMU R , NPA

Provider ID: 269680
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340

Provider Gender: Female
License number: NP95009639
NPI: 1598320996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PARK, SUN MIN

Provider ID: 262381
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6789
Fax: (760) 944-3927

After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP20538
NPI: 1376678250

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 262842
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858) 966-6377

Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

SRILASAK, MICHELE

Provider ID: 281856
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024-2475

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP13694
 NPI: 1265487326
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

STEARNS, PHILIP H

Provider ID: 265081
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
 Phone: (858) 966-6377
 Fax: (760) 944-3927
 After Hours Phone: (858) 966-6377
 Provider Gender: Male
 License number: NP11899
 NPI: 1609900810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No

Min/Max Age: 0/99
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

TOMICICH, STEPHANIE S

Provider ID: 286885
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141
 Phone: (760) 436-4558
 Fax: (858) 429-7926
 After Hours Phone: (760) 436-4558
 Provider Gender: Female
 License number: NP95002402
 NPI: 1316333792
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/125
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

WILLEY, MARTI L , NPA

Provider ID: 256422
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D200
 ENCINITAS, CA 92024-1375
 Phone: (760) 452-3340
 Fax:
 After Hours Phone: (760) 452-3340
 Provider Gender: Female
 License number: NP22548
 NPI: 1144574062
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CERTIFIED REGISTERED NURSE MIDWIFE

KARVER CHRISTENSON, ELYSE S

Provider ID: 257565
 Board Certified Specialty: Yes
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 943-9994
 Fax:
 After Hours Phone: (760) 943-9994
 Provider Gender: Female
 License number: NMW276
 NPI: 1720098155

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

DERMATOLOGY

GLADSJO, JULIE A , MD

Provider ID: 269052
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
License number: A98641
NPI: 1629234380
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
HEMPERLY, STEPHEN E
Provider ID: 243725
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Male
License number: 20A14658
NPI: 1013277045

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RILEY, JESSICA A

Provider ID: 243457
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D308
 ENCINITAS, CA 92024-1370
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female

License number: 20A16345
NPI: 1548677438
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHAIRER, DAVID O

Provider ID: 264680
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL # 302
 ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6795 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (858) 966-6795 <i>Provider Gender:</i> Female <i>License number:</i> A134345 <i>NPI:</i> 1437594884 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No	<i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No
SPRAGUE, JESSICA M <i>Provider ID:</i> 127463 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A134345 <i>NPI:</i> 1437594884 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
ENDOCRINOLOGY METABOLISM DIABETES		
	TOMPKINS, STACY D , MD <i>Provider ID:</i> 246363 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024-1370 <i>Phone:</i> (760) 436-2300 <i>Fax:</i> (760) 436-5482 <i>After Hours Phone:</i> (760) 436-2300 <i>Provider Gender:</i> Female <i>License number:</i> A52958 <i>NPI:</i> 1255418265 <i>Provider English Spoken:</i> Yes	GOTTESMAN BOWEN, BETHANY L <i>Provider ID:</i> 285959 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A156739 <i>NPI:</i> 1164849899 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No
SPRAGUE, JESSICA M <i>Provider ID:</i> 242315 <i>Board Certified Specialty:</i> No		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	NETWORK 477 N EL CAMINO REAL # 302 ENCINITAS, CA 92024-1328 <i>Phone:</i> (858) 966-6789 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (858) 966-6789 <i>Provider Gender:</i> Male <i>License number:</i> G80093 <i>NPI:</i> 1235167321 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>NPI:</i> 1629117643 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
HUPFELD, CHRISTOPHER J <i>Provider ID:</i> 277111 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 100 ENCINITAS, CA 92024-2475 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A64102 <i>NPI:</i> 1568429165 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	DILAURO, STEVEN C , MD <i>Provider ID:</i> 66036 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478 <i>Phone:</i> (760) 783-0441 <i>Fax:</i> (760) 635-5972 <i>After Hours Phone:</i> (760) 783-0441 <i>Provider Gender:</i> Male <i>License number:</i> A104332 <i>NPI:</i> 1629117643 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM	
GASTROENTEROLOGY		
FAMILY PRACTICE SPORTS MEDICINE	DILAURO, STEVEN C <i>Provider ID:</i> 66036 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478 <i>Phone:</i> (760) 783-0441 <i>Fax:</i> (760) 635-5972 <i>After Hours Phone:</i> (760) 783-0441 <i>Provider Gender:</i> Male <i>License number:</i> A104332	DILAURO, STEVEN C , MD <i>Provider ID:</i> 66036 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478 <i>Phone:</i> (760) 783-0441 <i>Fax:</i> (760) 635-5972 <i>After Hours Phone:</i> (760) 783-0441 <i>Provider Gender:</i> Male <i>License number:</i> A104332 <i>NPI:</i> 1629117643 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM
ACHAR, SURAJ A <i>Provider ID:</i> 255633 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH		

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GOLDKLANG, ROBERT H , MD

Provider ID: 66037
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441

Fax: (760) 635-5972

After Hours Phone: (760)
783-0441

Provider Gender: Male

License number: G69237

NPI: 1275527657

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LAJOIE, ADRIANNE M , MD

Provider ID: 65629

Board Certified Specialty: No

GENESIS HEALTHCARE

PARTNERS PC

700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478

Phone: (760) 783-0441

Fax: (760) 635-5972

After Hours Phone: (760)
783-0441

Provider Gender: Female

License number: A84301

NPI: 1225253651

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LAJOIE, ADRIANNE M , MD

Provider ID: 65629

Board Certified Specialty: No

COASTAL

GASTROENTEROLOGY A
PROF CORP

700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478

Phone: (760) 783-0441

Fax: (760) 635-5972

After Hours Phone: (760)
783-0441

Provider Gender: Female

License number: A84301

NPI: 1225253651

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SINGH, MARVIN M , MD

Provider ID: 123127

Board Certified Specialty: No

GENESIS HEALTHCARE

PARTNERS PC

700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478

Phone: (760) 783-0441

Fax: (760) 635-5972

After Hours Phone: (760)
783-0441

Provider Gender: Male

License number: A102749

NPI: 1306968417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean, Russian, Spanish,
Tagalog

Cultural Competency: No

Hospital Affiliation: University Of
California Irvine Med Ctr, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SINGH, MARVIN M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 123127
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax:
After Hours Phone: (760) 783-0441
Provider Gender: Male
License number: A102749
NPI: 1306968417
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A102482
NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr, Corona Regional Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Phone: (760) 944-0223
Fax:
After Hours Phone: (760) 944-0223
Provider Gender: Male
License number: G84752
NPI: 1093740110
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BESSUDO, ALBERTO

Provider ID: 278508
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
326 SANTA FE DR STE 105 ENCINITAS, CA 92024-5157
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Male
License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Pomerado Hospital, Palomar Medical

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N

Provider ID: 282164
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024-2475

HEMATOLOGY / ONCOLOGY

BALL, EDWARD D

Provider ID: 83201
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024-2475

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd FLORES, EDNA I , MD Provider ID: 256367 Board Certified Specialty: No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE D200 ENCINITAS, CA 92024-1375 Phone: (760) 452-3440 Fax: After Hours Phone: (760) 452-3440 Provider Gender: Female License number: A114373 NPI: 1396994604 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 16/120 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	& EXCEL-ENCINITA 477 N EL CAMINO REAL STE D200 ENCINITAS, CA 92024-1375 Phone: (760) 452-3340 Fax: (760) 452-3344 After Hours Phone: (760) 452-3340 Provider Gender: Female License number: A52663 NPI: 1174595144 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 16/120 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
BESSUDO, ALBERTO Provider ID: 278509 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 326 SANTA FE DR STE 105 ENCINITAS, CA 92024-5157 Phone: (760) 452-3340 Fax: (760) 452-3344 After Hours Phone: (760) 452-3340 Provider Gender: Male License number: A50309 NPI: 1003888074 Provider English Spoken: Yes Provider Language(s) Spoken: Hebrew, Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 16/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website:	FRAKES, LAURIE A Provider ID: 54038 Board Certified Specialty: No CA CANCER ASSOC FOR RES	SIDDIQUI, FAREEHA H Provider ID: 282174 Board Certified Specialty: No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024-2475 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A108879

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1104848720
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish, Urdu
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SUBRAMANIAN, RUPA

Provider ID: 282180
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A67026
 NPI: 1376547174
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Tamil
 Cultural Competency: No
 Hospital Affiliation: Corona Regional Med Ctr, Tri City Medical Ctr, Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas, Fountain Valley Regional Hosp And Med Ctr,

University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SULLIVAN, JESSICA E , MD

Provider ID: 243484
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D200
 ENCINITAS, CA 92024-1375
 Phone: (760) 452-3340
 Fax: (760) 452-3344
 After Hours Phone: (760) 452-3340
 Provider Gender: Female
 License number: 20A16273
 NPI: 1942407150
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Community Care Ipa Llc

HOSPICE AND PALLIATIVE MEDICINE

PASHA, SABIHA

Provider ID: 287252
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 326 SANTA FE DR STE 105
 ENCINITAS, CA 92024-5157
 Phone: (760) 452-3340
 Fax: (760) 452-3344
 After Hours Phone: (760) 452-3340
 Provider Gender: Female
 License number: C50413
 NPI: 1871529461
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish, Urdu
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center, Mercy Medical Center Redding, Pomerado Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RUBENSIK, TAMARA T

Provider ID: 245575
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 100
 ENCINITAS, CA 92024-2475

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENSIK, TAMARA T
Provider ID: 282127
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024-2475
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERNAL MEDICINE

LAJOIE, ADRIANNE M
Provider ID: 65629
Board Certified Specialty: No
COASTAL GASTROENTEROLOGY A PROF CORP
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax:
After Hours Phone: (760) 783-0441
Provider Gender: Female
License number: A84301
NPI: 1225253651
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LAJOIE, ADRIANNE M
Provider ID: 65629
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024-2478
Phone: (760) 783-0441
Fax:
After Hours Phone: (760) 783-0441
Provider Gender: Female
License number: A84301
NPI: 1225253651
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCCLAY, EDWARD F , MD
Provider ID: 243933
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE D200
ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: G64594
 NPI: 1497727465
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas, Palomar
 Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

MULRONEY, CAROLYN M
 Provider ID: 84293
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE
 200
 ENCINITAS, CA 92024-2475
 Phone: (760) 536-7700
 Fax:
 After Hours Phone: (760)
 536-7700
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RAISINGHANI, AJIT B
 Provider ID: 64681
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 477 N EL CAMINO REAL # B300
 ENCINITAS, CA 92024-1328
 Phone: (760) 634-8273
 Fax:
 After Hours Phone: (760)
 634-8273
 Provider Gender: Male
 License number: G75914
 NPI: 1831292796
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TOROSIAN, KARO
 Provider ID: 272858
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 212
 ENCINITAS, CA 92024-5139

Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858)
 558-8150
 Provider Gender: Male
 License number: 20A12445
 NPI: 1275822082
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E
 Provider ID: 258902
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL # 302
 ENCINITAS, CA 92024-1328
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710
 Provider Gender: Female
 License number: A116982
 NPI: 1447428420

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network	No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Rady Childrens Health Network BALLAS, JERASIMOS <i>Provider ID:</i> 209562 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481 <i>Phone:</i> (858) 657-7200 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7200 <i>Provider Gender:</i> Male <i>License number:</i> A112607 <i>NPI:</i> 1871767384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group	477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A149389 <i>NPI:</i> 1992149447 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i>
ADAMI, REBECCA R <i>Provider ID:</i> 277180 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A149389 <i>NPI:</i> 1992149447 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i>	CASELE, HOLLY L <i>Provider ID:</i> 258871 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK	CATANZARITE, VALERIAN A <i>Provider ID:</i> 258849 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HULL, ANDREW D

Provider ID: 209483
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: A53578
NPI: 1902862121
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELLY, THOMAS F

Provider ID: 210191
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Male
License number: G60630
NPI: 1336203496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes

Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAURENT, LOUISE C

Provider ID: 208641
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 781 GARDEN VIEW CT STE 200
 ENCINITAS, CA 92024-2481
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MCCULLOUGH, DEIRDRE M

Provider ID: 277264
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: C159758

NPI: 1639153018

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Sharp Grossmont

Hospital, Sharp Memorial

Hospital, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MOORE, THOMAS R

Provider ID: 208645

Board Certified Specialty: No

UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE 200

ENCINITAS, CA 92024-2481

Phone: (858) 657-7200

Fax:

After Hours Phone: (858)

657-7200

Provider Gender: Male

License number: G49930

NPI: 1184682379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RICHARDSON, ALVIE C

Provider ID: 277315

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Male

License number: C160063

NPI: 1154305977

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCHWENDEMANN, WADE D

Provider ID: 205436

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL

ENCINITAS, CA 92024-1328

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Male

License number: A109228

NPI: 1477563302

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Grossmont Hospital, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

TARSA, MARYAM

Provider ID: 209393
Board Certified Specialty: No
UCSD MEDICAL GROUP
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481
Phone: (858) 657-7200

Fax:

After Hours Phone: (858) 657-7200

Provider Gender: Female

License number: A69894

NPI: 1295768638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital Encinitas,

Palomar Medical Center, Ucsd

La Jolla John Sally Thornton,

Ucsd Medical Ctr, Eisenhower
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

THOMAS, STEVEN J

Provider ID: 209480

Board Certified Specialty: No

UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024-2481

Phone: (858) 657-7200

Fax:

After Hours Phone: (858)

657-7200

Provider Gender: Male

License number: A40379

NPI: 1639242589

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus, Ucsd

Medical Ctr, Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Scripps

Memorial Hospital, Palomar

Medical Center, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TITH, TEVY

Provider ID: 277328

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A103521

NPI: 1588816086

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Sharp Mary Birch

Hosp For Women And

Newborns, University Of

California Irvine Med Ctr, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WESTERMANN, MELISSA L

Provider ID: 277354

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 277386

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San

Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And

Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WOELKERS, DOUGLAS A

Provider ID: 209384

Board Certified Specialty: No
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481

Phone: (858) 657-7200

Fax:

After Hours Phone: (858) 657-7200

Provider Gender: Male

License number: G77134

NPI: 1013965748

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WOLF, RICHARD B

Provider ID: 209254

Board Certified Specialty: No
UCSD MEDICAL GROUP

781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481

Phone: (858) 657-7200

Fax:

After Hours Phone: (858) 657-7200

Provider Gender: Male

License number: 20A6028

NPI: 1497713846

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NEPHROLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

BOISKIN, MARK M

Provider ID: 113514

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139

Phone: (760) 509-1040

Fax: (760) 967-6769

After Hours Phone: (760)
509-1040

Provider Gender: Male

License number: A52055

NPI: 1437154143

Provider English Spoken: Yes

Provider Language(s) Spoken:
Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BOISKIN, MARK M

Provider ID: 113514

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139

Phone: (760) 509-1040

Fax:

After Hours Phone: (760)
509-1040

Provider Gender: Male

License number: A52055

NPI: 1437154143

Provider English Spoken: Yes

Provider Language(s) Spoken:
Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.balboacare.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BOISKIN, MARK M , MD

Provider ID: 273106

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139

Phone: (760) 509-1040

Fax: (760) 967-6769

After Hours Phone: (760)
509-1040

Provider Gender: Male

License number: A52055

NPI: 1437154143

Provider English Spoken: Yes

Provider Language(s) Spoken:
Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

LAKHERA, YOGITA

Provider ID: 109347

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

320 SANTA FE DR STE 212
ENCINITAS, CA 92024-5139

Phone: (858) 509-1040

Fax:

After Hours Phone: (858)
509-1040

Provider Gender: Female

License number: A125173

NPI: 1083972483

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 9AM-5PM, SA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

LAKHERA, YOGITA

Provider ID: 262129
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 320 SANTA FE DR STE 212
 ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax: (858) 346-1024
After Hours Phone: (760)
 509-1040
Provider Gender: Female
License number: A125173
NPI: 1083972483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

STEER, DYLAN L , MD

Provider ID: 272853
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 212
 ENCINITAS, CA 92024-5139
Phone: (760) 509-1040
Fax: (760) 967-6769
After Hours Phone: (760)
 509-1040
Provider Gender: Male
License number: A65604
NPI: 1437154978
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Imperial Health Holdings
 Medical Group-Sd

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA S

Provider ID: 206258
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374

Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A120194
NPI: 1174870067
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: University Of
 California Irvine Med Ctr,
 Childrens Hospital Of Orange
 County, Rady Childrens Hospital
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

SAHAGIAN, MICHELLE L

Provider ID: 206073
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A80990
NPI: 1275604035
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEUROLOGY

BUI, JONATHAN D

Provider ID: 269966
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-6377
Fax: (760) 944-3927
After Hours Phone: (760)
944-6377
Provider Gender: Male
License number: A96574
NPI: 1730247974
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network
JINDAL, ANUJA V
Provider ID: 206264
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545

Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAHAGIAN, MICHELLE L

Provider ID: 52601
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374

Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A80990
NPI: 1275604035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TROXELL, REGINA M

Provider ID: 265112
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group	<i>Provider ID:</i> 282167 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024-2475 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149945 <i>NPI:</i> 1174758031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Spanish</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
TROXELL, REGINA M <i>Provider ID:</i> 283168 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Female <i>License number:</i> A157940 <i>NPI:</i> 1013350586 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network, Ucsd Medical Group	<i>Provider ID:</i> 283168 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 200 ENCINITAS, CA 92024-2475 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149945 <i>NPI:</i> 1174758031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	RIES, MAUREEN C <i>Provider ID:</i> 125253 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 100 ENCINITAS, CA 92024-2475 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A127234 <i>NPI:</i> 1750544516 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Indonesian, Spanish, Swahili <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM
LAMALE-SMITH, LEAH M <i>Provider ID:</i> 208682 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024-2481 <i>Phone:</i> (858) 657-7200 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7200 <i>Provider Gender:</i> Female <i>License number:</i> A135831 <i>NPI:</i> 1396904876 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	OBSTETRICS / GYNECOLOGY	
BINDER, PRATIBHA S		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SCHWENDEMANN, WADE D <i>Provider ID:</i> 52500 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Male <i>License number:</i> A109228 <i>NPI:</i> 1477563302 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, Sharp Grossmont Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Provider ID:</i> 272578 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 1200 GARDEN VIEW RD STE 100 ENCINITAS, CA 92024-2475 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A168801 <i>NPI:</i> 1558715268 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>NPI:</i> 1174595144 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
OPHTHALMOLOGY		
ABBOUD, JEAN-PAUL J <i>Provider ID:</i> 214189 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 <i>Phone:</i> (760) 944-5545 <i>Fax:</i> (760) 944-3927 <i>After Hours Phone:</i> (760) 944-5545 <i>Provider Gender:</i> Male <i>License number:</i> A124825 <i>NPI:</i> 1760776728 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Tri		
ONCOLOGY MEDICAL		
FRAKES, LAURIE A , MD <i>Provider ID:</i> 269133 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE C204 ENCINITAS, CA 92024-1332 <i>Phone:</i> (760) 452-3340 <i>Fax:</i> (760) 452-3344 <i>After Hours Phone:</i> (760) 452-3340 <i>Provider Gender:</i> Female <i>License number:</i> A52663		
SHAH, NEMI M		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

City Medical Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMS, MONA N

Provider ID: 260961
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BANSAL, PREETI

Provider ID: 205617
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BANSAL, PREETI

Provider ID: 52611
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (858) 966-7403
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital, Tri City
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BHATIA, SHAGUN K

Provider ID: 267315
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LEE, JASON

Provider ID: 262162
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Male
License number: OPT14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp Of Los Angeles, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MCGRAW, JOSEPH P , MD

Provider ID: 269706
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760)
 943-7141
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOLL, ANGELA M

Provider ID: 205507
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp
 Memorial Hospital, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MOLL, ANGELA M

Provider ID: 52618
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 License number: A105472
 NPI: 1861648602
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Sharp
 Memorial Hospital, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MOVAGHAR, MANSOOR
 Provider ID: 216413
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax:
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A100897
 NPI: 1497792220

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

OHALLORAN, HENRY S
 Provider ID: 205886
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A73282
 NPI: 1235287947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

OHALLORAN, HENRY S
 Provider ID: 52621
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A73282
 NPI: 1235287947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PANSARA, MEGHA L
 Provider ID: 286600
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

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D. Directorio de proveedores de atención especializada

NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Female
 License number: A143429
 NPI: 1184983728
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Gujarati, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Pomerado
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SCHER, COLIN A
 Provider ID: 206326
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A42700
 NPI: 1396816153

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center,
 Grossmont Hospital, Tri City
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SCHER, COLIN A
 Provider ID: 52624
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760)
 944-5545
 Provider Gender: Male
 License number: A42700
 NPI: 1396816153
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center,
 Grossmont Hospital, Tri City

Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SCOTTI, FRANK A , MD
 Provider ID: 255689
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 104
 ENCINITAS, CA 92024-5139
 Phone: (760) 943-7141
 Fax: (844) 897-3788
 After Hours Phone: (760)
 943-7141
 Provider Gender: Male
 License number: G40698
 NPI: 1801824313
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OTOLARYNGOLOGY /

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

OTOLOGY / LARYNGOLOGY / RHINOLOGY	ENCINITAS, CA 92024-1374 Phone: (760) 944-5545 Fax:	Min/Max Age: 0/18 American Sign Language (ASL): No
BLISS, MORGAN R Provider ID: 206085 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL # 302 ENCINITAS, CA 92024-1328 Phone: (760) 944-5545 Fax: (760) 944-3927 After Hours Phone: (760) 944-5545 Provider Gender: Female License number: A134647 NPI: 1760707657 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	After Hours Phone: (760) 944-5545 Provider Gender: Female License number: A134647 NPI: 1760707657 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
OTOLARYNGOLOGY	FRIESEN, TZYYNONG L Provider ID: 244900 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 Phone: (760) 944-5545 Fax: After Hours Phone: (760) 944-5545 Provider Gender: Female License number: A152327 NPI: 1952740177 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes	LEUIN, SHELBY C Provider ID: 206112 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024-1374 Phone: (760) 944-5545 Fax: (760) 944-3927 After Hours Phone: (760) 944-5545 Provider Gender: Female License number: A112930 NPI: 1124230909 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
BLISS, MORGAN R Provider ID: 112859 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 477 N EL CAMINO REAL STE D302		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LEUIN, SHELBY C

Provider ID: 52722

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FN DTDN

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

License number: A112930

NPI: 1124230909

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NATION, JAVAN J

Provider ID: 83129

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FN DTDN

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

License number: A125279

NPI: 1043478902

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER N

Provider ID: 205696

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-6377

Fax: (760) 944-3927

After Hours Phone: (760)
944-6377

Provider Gender: Male

License number: A77327

NPI: 1609801299

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

HOFFMAN, HAROLD M

Provider ID: 206003

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

License number: A53101

NPI: 1326074261

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAUBACH, SUSAN S

Provider ID: 205801
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858) 966-6377
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

FAGAN, BRIAN T

Provider ID: 205344

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A82153
NPI: 1740308550
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HALEY, JESSICA E

Provider ID: 205688
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: A125568
NPI: 1023329885
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEGDE, SANJEET R

Provider ID: 206077
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SILVA SEPULVEDA, JOSE A

Provider ID: 206299
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Male
License number: A120119
NPI: 1417222472
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC DERMATOLOGY

DOHIL, MAGDALENE A

Provider ID: 205417
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A86265
NPI: 1528139383
Provider English Spoken: Yes
Provider Language(s) Spoken:
 German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC ENDOCRINOLOGY

DEMETERCO BERGGREN, CARLA

Provider ID: 206160

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A98629
NPI: 1619130655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GOTTSCHALK, MICHAEL E

Provider ID: 205776
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Male
License number: G55424
NPI: 1033280888

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

NEWFIELD, RON S

Provider ID: 205371
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Male
License number: A73875
NPI: 1679644421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC GASTROENTEROLOGY

NEWTON, KIMBERLY P

Provider ID: 205360
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A101980
NPI: 1912071655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Naval Medical
 Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network
NEWTON, KIMBERLY P
Provider ID: 52263

Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
 944-5545
Provider Gender: Female
License number: A101980
NPI: 1912071655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Naval Medical
 Ctr Sd Rbe
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC ORTHOPEDICS

WALLACE, CHARLES D

Provider ID: 205660
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 477 N EL CAMINO REAL STE
 D302
 ENCINITAS, CA 92024-1374

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858) 966-6789

Provider Gender: Male
License number: G67953
NPI: 1144229600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Parkview Community Hospital
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

CERNELC KOHAN, MATEJKA

Provider ID: 243043
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A116947
NPI: 1871752451
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA C

Provider ID: 246395
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax:
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A98479
NPI: 1821242199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRICS

BAI-TONG, SHIYU S

Provider ID: 283286
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 633-6120
Fax:

After Hours Phone: (760)
633-6120
Provider Gender: Female
License number: A155419
NPI: 1528454188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOTTSCHALK, MICHAEL E

Provider ID: 52048
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

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D. Directorio de proveedores de atención especializada

477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: G55424
NPI: 1033280888
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WELCH, MICHAEL J

Provider ID: 54278
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax:
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: G34844
NPI: 1699794222
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

BELNAP, BRIAN D

Provider ID: 92105
Board Certified Specialty: No
WEST COAST PAIN SPECIALISTS
4405 MANCHESTER AVE STE 101
ENCINITAS, CA 92024-4940
Phone: (760) 650-4040
Fax:
After Hours Phone: (760) 650-4040
Provider Gender: Male
License number: 20A10439
NPI: 1457360448
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M 8:30AM-5PM, TU-TH

8AM-5PM, F 8AM-12PM, SA 9AM-5PM
Website: www.wcpaindoc.com
Email:
Medical Group(s):
IPA:

LEE, HAEWON

Provider ID: 256227
Board Certified Specialty: No
UCSD MEDICAL GROUP
477 N EL CAMINO REAL STE C100
ENCINITAS, CA 92024-1332
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A161567
NPI: 1447661657
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHYSICIANS ASSISTANT

ASARO, AMANDA M

Provider ID: 260262
Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. Directorio de proveedores de atención especializada

NETWORK

477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CLARK, YVONNE L

Provider ID: 260063
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA20447
NPI: 1629302476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DICKINSON, ALLISON J

Provider ID: 260626
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858) 966-6377
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DOMINGUEZ, KATHLEEN H

Provider ID: 270355
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE B105
ENCINITAS, CA 92024-1330
Phone: (760) 753-7143
Fax: (760) 753-2155
After Hours Phone: (760) 753-7143
Provider Gender: Female
License number: PA17714
NPI: 1689784530
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

DOUGHERTY, CLARA, NPA

Provider ID: 269171
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760) 436-4558
Provider Gender: Female
License number: PA17439
NPI: 1609987619

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOUGHERTY, CLARA

Provider ID: 56020
Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760) 436-4558
Provider Gender: Female
License number: PA17439
NPI: 1609987619
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FLOCO, VIRGINIA A

Provider ID: 260683
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL # 302
 ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax:
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HIGGINS, JOSHUA B

Provider ID: 287134
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1505 ENCINITAS BLVD
 ENCINITAS, CA 92024-2933
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA20471
NPI: 1861624181

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAZAR, ANITA A

Provider ID: 262301
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA55984
NPI: 1609208198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

MCCAULEY, KRISTINA R

Provider ID: 262243
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL # 302
ENCINITAS, CA 92024-1328
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MUNCH, LINH D

Provider ID: 260089
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374

Phone: (858) 966-6377
Fax: (760) 944-3927
After Hours Phone: (858) 966-6377
Provider Gender: Female
License number: PA14223
NPI: 1679792725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NGUYEN, CECILIA

Provider ID: 289155
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
License number: PA57419
NPI: 1629636816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PAIK, CHRISTINA N

Provider ID: 262431
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
477 N EL CAMINO REAL # D392
ENCINITAS, CA 92024-1328
Phone: (858) 966-6789
Fax: (760) 944-3927
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA21680
NPI: 1174811475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANCHEZ, RAQUEL

Provider ID: 262630
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302

ENCINITAS, CA 92024-1374

Phone: (858) 966-6377

Fax: (760) 944-3927

After Hours Phone: (858)

966-6377

Provider Gender: Female

License number: PA14357

NPI: 1356560650

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SUTTON, BRIAN C

Provider ID: 272241

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE

200

ENCINITAS, CA 92024-2475

Phone: (760) 598-1776

Fax: (760) 598-5744

After Hours Phone: (760)

598-1776

Provider Gender: Male

License number: PA18573

NPI: 1629174727

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VANETSKY, GARY E

Provider ID: 108458

Board Certified Specialty: Yes

WEST DERMATOLOGY AND

SURG MED GRP

477 N EL CAMINO REAL STE

D308

ENCINITAS, CA 92024-1370

Phone: (760) 436-2300

Fax:

After Hours Phone: (760)

436-2300

Provider Gender: Male

License number: PA15456

NPI: 1417034489

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VANETSKY, GARY E , NPA

Provider ID: 269152

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

477 N EL CAMINO REAL STE

D308

ENCINITAS, CA 92024-1370

Phone: (760) 436-2300

Fax: (760) 436-5482

After Hours Phone: (760)

436-2300

Provider Gender: Male

License number: PA15456

NPI: 1417034489

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VILLAPANDO, NORMA O

Provider ID: 264058

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

477 N EL CAMINO REAL STE

D302

ENCINITAS, CA 92024-1374

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)

944-5545

Provider Gender: Female

License number: PA56098

NPI: 1376947960

Provider English Spoken: Yes

Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PODIATRIST

DUSTIN, ADAM F

Provider ID: 275800

Board Certified Specialty: No

UCSD MEDICAL GROUP

326 ENCINITAS BLVD STE 100

ENCINITAS, CA 92024-8703

Phone: (760) 436-5533

Fax: (760) 436-0611

After Hours Phone: (760)

436-5533

Provider Gender: Male

License number: DPM4254

NPI: 1043389026

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RADIATION ONCOLOGY

MACEWAN, IAIN J

Provider ID: 205876

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE

210

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A129079

NPI: 1326300401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Rady Childrens Health Network,

Ucsd Medical Group

RASH, DOMINIQUE L

Provider ID: 108346

Board Certified Specialty: No

UCSD RADIATION ONCOLOGY

1200 GARDEN VIEW RD STE

210

ENCINITAS, CA 92024-2475

Phone: (858) 246-0500

Fax:

After Hours Phone: (858)

246-0500

Provider Gender: Female

License number: A116999

NPI: 1699908640

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Methodist

Hosp Of Sacramento, Mercy

Hospital Of Folsom, Mercy

General Hospital, Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Green

Hospital, Tri City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROSE, BRENT S

Provider ID: 113904

Board Certified Specialty: No

UCSD RADIATION ONCOLOGY

1200 GARDEN VIEW RD STE

210

ENCINITAS, CA 92024-2475

Phone: (858) 246-0500

Fax:

After Hours Phone: (858)

246-0500

Provider Gender: Male

License number: A142735

NPI: 1518250869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

URBANIC, JAMES J

Provider ID: 87271

Board Certified Specialty: No
UCSD RADIATION ONCOLOGY
1200 GARDEN VIEW RD STE 210

ENCINITAS, CA 92024-2475

Phone: (858) 246-0500

Fax: (858) 246-0501

After Hours Phone: (858) 246-0500

Provider Gender: Male

License number: C131112

NPI: 1164607875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R

Provider ID: 125985

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Phone: (760) 452-7150

Fax: (760) 632-5389

After Hours Phone: (760) 452-7150

Provider Gender: Male

License number: A69840

NPI: 1215982970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268358

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE A102

ENCINITAS, CA 92024-1329

Phone: (760) 452-7150

Fax: (866) 558-4329

After Hours Phone: (760) 452-7150

Provider Gender: Male

License number: A69840

NPI: 1215982970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125983

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Phone: (760) 452-7150

Fax:

After Hours Phone: (760) 452-7150

Provider Gender: Male

License number: A90018

NPI: 1841467099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

Provider ID: 125992
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126005

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W

Provider ID: 243264
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
477 N EL CAMINO REAL STE A102
ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 126011
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 126040
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta, Coast Plaza Hospital, Community Hospital Of Huntington Park, Foothill Regional Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126047

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZANIA, NILOFAR

Provider ID: 126169
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRANKE, MARK A

Provider ID: 126053
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HARMAN, SCOTT A

Provider ID: 126066
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126077
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328

Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126091
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G74959
NPI: 1598718926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LUBISICH, JOHN P

Provider ID: 126097
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G77575
NPI: 1194863902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 126118
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OLOUGHLIN, BRIAN J
Provider ID: 126124
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: A120064
NPI: 1972709087
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Santa
Monica Ucla Med Ctr, Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S
Provider ID: 126130
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
452-7150
Provider Gender: Female
License number: G48800
NPI: 1285685925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S
Provider ID: 126136
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760)
452-7150
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, El Centro Regional
Medical Center, Selma
Community Hospital, Adventist
Med Ctr Reedley, Scripps Mercy
Hospital Chula Vista, Adventist
Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E
Provider ID: 126143
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126150
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126156
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TENA, ROWENA G

Provider ID: 126162
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126215
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
477 N EL CAMINO REAL # 102
ENCINITAS, CA 92024-1328
Phone: (760) 452-7150
Fax: (760) 632-5389
After Hours Phone: (760) 452-7150
Provider Gender: Male
License number: A45908

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1730132150 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: ZINK BRODY, GORDON C Provider ID: 126193 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 477 N EL CAMINO REAL # 102 ENCINITAS, CA 92024-1328 Phone: (760) 452-7150 Fax: (760) 632-5389 After Hours Phone: (760) 452-7150 Provider Gender: Male License number: G68636 NPI: 1689610362 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Alvarado Hospital Llc, Oak Valley Dist Hosp Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	RADIOLOGY DOEMENY, JOHN M Provider ID: 269750 Board Certified Specialty: No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE A102 ENCINITAS, CA 92024-1329 Phone: (760) 452-7150 Fax: (866) 558-4329 After Hours Phone: (760) 452-7150 Provider Gender: Male License number: G50925 NPI: 1841243912 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
TSUKADA, GLENN H Provider ID: 126200 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 477 N EL CAMINO REAL # 102 ENCINITAS, CA 92024-1328 Phone: (760) 452-7150 Fax: (760) 632-5389 After Hours Phone: (760) 452-7150 Provider Gender: Male License number: A60235 NPI: 1710938394 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Alvarado Hospital Llc, Pomerado Hospital Medi-Cal Open Panel: No Min/Max Age: None	FRANKE, MARK A Provider ID: 269635 Board Certified Specialty: No COMMUNITY CARE IPA LLC 477 N EL CAMINO REAL STE A102 ENCINITAS, CA 92024-1329 Phone: (760) 452-7150 Fax: (866) 558-4329 After Hours Phone: (760) 452-7150	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
 Ucla Med Ctr, Ronald Reagan
 Ucla Med Ctr, Alvarado Hospital
 Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269524
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 A102
 ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760)
 452-7150
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
SCHWARTZBERG, ROSS E
Provider ID: 245629
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE
 A102
 ENCINITAS, CA 92024-1329
Phone: (760) 452-7150
Fax:
After Hours Phone: (760)
 452-7150
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269824
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL # 102
 ENCINITAS, CA 92024-1328

Phone: (760) 452-7150
Fax: (866) 558-4329
After Hours Phone: (760)
 452-7150
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

REDDY, DANA A

Provider ID: 262364
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 230 2ND ST STE 102
 ENCINITAS, CA 92024-3275
Phone: (619) 427-1721
Fax: (619) 427-1235
After Hours Phone: (619)
 427-1721
Provider Gender: Female
License number: A115598
NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings Medical Group-Sd

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A118231

NPI: 1861759383

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Medical Ctr At

Ucsf, Ucsf Medical Center At

Mission Bay, Ucsf Medical

Center At Mount Zion, Ucsd La

Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

COSMAN, BARD C

Provider ID: 63746

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE 200

ENCINITAS, CA 92024-2475

Phone: (760) 944-0223

Fax:

After Hours Phone: (760)

944-0223

Provider Gender: Male

License number: G66321

NPI: 1477513810

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JACOBSEN, GARTH R

Provider ID: 201730

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD

ENCINITAS, CA 92024-2477

Phone: (858) 657-8860

Fax:

After Hours Phone: (858)

657-8860

Provider Gender: Male

License number: A99668

NPI: 1265649966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

SURGERY COLON SURGERY

PARRY, LISA A

Provider ID: 278552

Board Certified Specialty: No

UCSD MEDICAL GROUP

1200 GARDEN VIEW RD STE

200

ENCINITAS, CA 92024-2475

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A131297

NPI: 1235369067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WALLACE, ANNE M

Provider ID: 64488
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
Phone: (760) 944-0223
Fax:
After Hours Phone: (760) 944-0223
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YOO, FRANK K , MD

Provider ID: 257374
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 477 N EL CAMINO REAL STE D200
 ENCINITAS, CA 92024-1375
Phone: (760) 452-3340
Fax: (760) 452-3344
After Hours Phone: (760) 452-3340
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Alvarado Hospital Llc, Paradise Valley Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CHANG, DOUGLAS G

Provider ID: 104611
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken: German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COVEY, DANA C

Provider ID: 83309
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
Phone: (760) 944-0223
Fax:
After Hours Phone: (760) 944-0223
Provider Gender: Male
License number: G89432

SURGERY ORTHOPEDIC

SURGERY NEUROLOGICAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1780651794
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VITALE, KENNETH C

Provider ID: 104654
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475
 Phone: (760) 536-7670
 Fax:
 After Hours Phone: (760) 536-7670
 Provider Gender: Male
 License number: C132964
 NPI: 1730176868
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA:
WALLACE, CHARLES D
 Provider ID: 52696
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED FNDTN
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax:
 After Hours Phone: (760) 944-5545
 Provider Gender: Male
 License number: G67953
 NPI: 1144229600
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ZLOMISLIC, VINKO

Provider ID: 84071
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 1200 GARDEN VIEW RD STE 200
 ENCINITAS, CA 92024-2475

Phone: (760) 944-0223
 Fax: (858) 657-8235
 After Hours Phone: (760) 944-0223
 Provider Gender: Male
 License number: A112819
 NPI: 1346351509
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Serbo-Croatian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY J

Provider ID: 205497
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Male
 License number: A80244
 NPI: 1407010556
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp
Memorial Hospital, Scripps
Memorial Hospital, Childrens
Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KLING, KAREN M

Provider ID: 206128
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760)
944-5545
Provider Gender: Female
License number: A53583
NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, National Naval Med
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SURGERY PLASTIC

REID, CHRISTOPHER M

Provider ID: 238130
Board Certified Specialty: No
UCSD MEDICAL GROUP
1200 GARDEN VIEW RD
ENCINITAS, CA 92024-2477
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

UROLOGY

BUTLER, PHILIP A , MD

Provider ID: 269433
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
320 SANTA FE DR STE 305
ENCINITAS, CA 92024-5140
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760)
436-4558
Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUTLER, PHILIP A

Provider ID: 55907
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
320 SANTA FE DR STE 108
ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax:
After Hours Phone: (760)
436-4558
Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHIANG, GEORGE

Provider ID: 205942
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 477 N EL CAMINO REAL STE D302
 ENCINITAS, CA 92024-1374
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
License number: A98687
NPI: 1093773954
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center, Northern Inyo Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COHEN, EDWARD S , MD

Provider ID: 269340
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 305
 ENCINITAS, CA 92024-5140
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COHEN, EDWARD S

Provider ID: 56014
Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141

Phone: (760) 436-4558
Fax:
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: G56844
NPI: 1093756827
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JUMA, SAAD, MD

Provider ID: 244006
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Male
License number: A42398
NPI: 1013931930
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Tri City Medical Ctr, Scripps Memorial

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JUMA, SAAD

Provider ID: 40234
Board Certified Specialty: No
 GENESIS HEALTHCARE
 PARTNERS PC
 320 SANTA FE DR STE 108
 ENCINITAS, CA 92024-5141
Phone: (760) 753-8373
Fax:
After Hours Phone: (760)
 753-8373
Provider Gender: Male
License number: A42398
NPI: 1013931930
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAITOH, JOHN, MD

Provider ID: 269477
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 320 SANTA FE DR STE 305
 ENCINITAS, CA 92024-5140
Phone: (760) 436-4558
Fax:
After Hours Phone: (760)
 436-4558
Provider Gender: Male
License number: G82079
NPI: 1629010509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAITOH, JOHN

Provider ID: 55261
Board Certified Specialty: No
 GENESIS HEALTHCARE
 PARTNERS PC
 320 SANTA FE DR STE 305
 ENCINITAS, CA 92024-5140
Phone: (760) 436-4558
Fax: (858) 429-7925
After Hours Phone: (760)
 436-4558
Provider Gender: Male
License number: G82079
NPI: 1629010509
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ESCONDIDO

ALLERGY IMMUNOLOGY

LAUBACH, SUSAN S

Provider ID: 277885
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
 755-7600
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Provider ID: 268178 Board Certified Specialty: No COMMUNITY CARE IPA LLC 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 Phone: (442) 281-5000 Fax: After Hours Phone: (442) 281-5000 Provider Gender: Male License number: A146733 NPI: 1598021982 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Riverside Community Hosp, Parkview Community Hospital Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
WELCH, MICHAEL J		
Provider ID: 277878 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 200 ESCONDIDO, CA 92029-4159 Phone: (760) 755-7600 Fax: (760) 755-7699 After Hours Phone: (760) 755-7600 Provider Gender: Male License number: G34844 NPI: 1699794222 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Provider ID: 239611 Board Certified Specialty: No COMMUNITY CARE IPA LLC 160 N DATE ST ESCONDIDO, CA 92025-3406 Phone: (888) 873-6220 Fax: (888) 873-6220 After Hours Phone: (888) 873-6220 Provider Gender: Male License number: 20A11914 NPI: 1326363300 Provider English Spoken: Yes	ACHATEL, ROGER J , MD Provider ID: 269351 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 300 ESCONDIDO, CA 92029-4113 Phone: (760) 743-0546 Fax: (760) 743-8005 After Hours Phone: (760) 743-0546 Provider Gender: Male License number: G45947 NPI: 1730182619 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM
ANESTHESIOLOGY PAIN MANAGEMENT		
COHEN, ZACHARY C , MD		
ANESTHESIOLOGY		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BAYAT, HAMED

Provider ID: 257491
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 1955 CITRACADO PKWY STE 300
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A61356
NPI: 1356344196
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

BAYAT, HAMED, MD

Provider ID: 53687
Board Certified Specialty: No
ARCH HEALTH PARTNERS

1955 CITRACADO PKWY STE 300
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A61356
NPI: 1356344196
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

CHEN, ANDREW K , MD

Provider ID: 269314
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 300
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A120866
NPI: 1134357007

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DAVIS, CHRISTOPHER K

Provider ID: 277811
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A100260
NPI: 1760691950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (760) 743-0546 <i>Fax:</i> (760) 743-8837 <i>After Hours Phone:</i> (760) 743-0546 <i>Provider Gender:</i> Male <i>License number:</i> G25365 <i>NPI:</i> 1891798658 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No
FAGAN, BRIAN T <i>Provider ID:</i> 277840 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 100 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 294-9260 <i>Fax:</i> (760) 294-9274 <i>After Hours Phone:</i> (760) 294-9260 <i>Provider Gender:</i> Male <i>License number:</i> A82153 <i>NPI:</i> 1740308550 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>	GILBERT, CHRISTOPHER R , MD <i>Provider ID:</i> 63549 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 300 ESCONDIDO, CA 92029-4113 <i>Phone:</i> (760) 743-0546 <i>Fax:</i> (760) 743-8837 <i>After Hours Phone:</i> (760) 743-0546 <i>Provider Gender:</i> Male <i>License number:</i> A35403 <i>NPI:</i> 1487657243 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Palomar Medical Center, Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	HALEY, JESSICA E <i>Provider ID:</i> 277867 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 100 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 294-9260 <i>Fax:</i> (760) 294-9274 <i>After Hours Phone:</i> (760) 294-9260 <i>Provider Gender:</i> Female <i>License number:</i> A125568 <i>NPI:</i> 1023329885 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego
	GORWIT, JEFFREY I , MD <i>Provider ID:</i> 63540 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 300 ESCONDIDO, CA 92029-4113	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEGDE, SANJEET R

Provider ID: 277893
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEE, YOUNG E

Provider ID: 269316

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A130275
NPI: 1285833764
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MALEK, MIKHAIL R , MD
Provider ID: 269307
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 300
ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
License number: A50952
NPI: 1467455212
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NARAYAN, HARI K

Provider ID: 277846
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A144821
NPI: 1376705707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAWHNEY, NAVINDER S , MD

Provider ID: 112701

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300

ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760)

743-0546

Provider Gender: Male

License number: A86378

NPI: 1619174133

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Pomerado Hospital, Palomar

Medical Center, Scripps

Memorial Hospital, Scripps

Green Hospital, Ucsd Medical

Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SERRY, ROD D , MD

Provider ID: 54469

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
300

ESCONDIDO, CA 92029-4113

Phone: (760) 743-0546

Fax: (760) 743-8837

After Hours Phone: (760)

743-0546

Provider Gender: Male

License number: A76061

NPI: 1912945130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Portuguese, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CERTIFIED NURSE PRACTITIONER

BARMACK, KIMBERLY M , NPA

Provider ID: 269270

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
200

ESCONDIDO, CA 92029-4112

Phone: (760) 743-4789

Fax: (760) 743-4779

After Hours Phone: (760)

743-4789

Provider Gender: Female

License number: NP20705

NPI: 1881018067

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DICKINSON, NATASHA A

Provider ID: 283660

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 200

ESCONDIDO, CA 92029-4159

Phone: (858) 966-8801

Fax: (858) 966-8511

After Hours Phone: (858)

966-8801

Provider Gender: Female

License number: NP17677

NPI: 1073845327

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

DINNALL, CHRISTINA M

Provider ID: 289132

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
License number: NP95005438
NPI: 1831632843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HAASS, ADRIANNA M
Provider ID: 261044
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92025-6428
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Provider Gender: Female
License number: NP95005120
NPI: 1225588130

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEAD, KRISTIN N
Provider ID: 277866
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: NP20264
NPI: 1699078923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KROCHMAL, RACHEL E
Provider ID: 276935
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Female
License number: NP457272
NPI: 1326117920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KROCHMAL, RACHEL E
Provider ID: 276936
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 233-1896
 Fax: (760) 233-1899
 After Hours Phone: (760) 233-1896
 Provider Gender: Female
 License number: NP457272
 NPI: 1326117920
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LEVY, SHARON B

Provider ID: 277876
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Female
 License number: NP95003383
 NPI: 1316396807
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LILLY, ANNA M

Provider ID: 289233
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-3193
 Fax: (442) 281-3197
 After Hours Phone: (442) 281-3193
 Provider Gender: Female
 License number: NP95009518
 NPI: 1831596667
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center, Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LIPMAN, RACHEL E

Provider ID: 265114
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92025-6428
 Phone: (760) 746-2641
 Fax: (760) 740-2178
 After Hours Phone: (760) 746-2641
 Provider Gender: Female
 License number: NP95000707
 NPI: 1871933879
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MANCHESTER, KAREN L

Provider ID: 276926
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378
 Phone: (760) 658-6101
 Fax: (760) 658-6106
 After Hours Phone: (760) 658-6101
 Provider Gender: Female
 License number: NP20883
 NPI: 1801225941
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MANCHESTER, KAREN L

Provider ID: 276927
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Female
License number: NP20883
NPI: 1801225941

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MEYERS, JUDITH S , NPA

Provider ID: 274695
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 300
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-4789
Fax: (760) 743-8005
After Hours Phone: (760) 743-4789
Provider Gender: Female
License number: NP95010314
NPI: 1538637194

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MIRANDA, BRIDGET A

Provider ID: 277845
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Northern Inyo Hosp
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MITRUKA, ANNE F , NPA

Provider ID: 269427
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 300
 ESCONDIDO, CA 92029-4113
Phone: (760) 743-0546
Fax:
After Hours Phone: (760) 743-0546
Provider Gender: Female
License number: NP13563
NPI: 1083795843

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MURRAY, CARLA M , NPA

Provider ID: 242749

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1509 E VALLEY PKWY
 ESCONDIDO, CA 92027-2315
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Provider Gender: Female
License number: NP12682
NPI: 1346453503
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PIDDING, APRYL D

Provider ID: 269252
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 625 CITRACADO PKWY STE 110
 ESCONDIDO, CA 92025-6428
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: NP20027
NPI: 1518259936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

QUACH, LINDA L

Provider ID: 286020
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
License number: NP95013206
NPI: 1275053811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: The Mount Sinai Hosp, Rady Childrens Hospital San Diego, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAY, PEGGY L

Provider ID: 276880

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Female
License number: NP95004962
NPI: 1326583998
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAY, PEGGY L

Provider ID: 276881
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Female
License number: NP95004962
NPI: 1326583998
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RUDISILL, PAMELA J

Provider ID: 276954
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Female
License number: NP21448
NPI: 1871608018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RUDISILL, PAMELA J

Provider ID: 276955
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
Phone: (760) 233-1896
Fax: (760) 233-1899
After Hours Phone: (760) 233-1896
Provider Gender: Female
License number: NP21448
NPI: 1871608018

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 277892
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPAULDING, ENJOLI B

Provider ID: 129202
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax:
After Hours Phone: (760) 294-1660
Provider Gender: Female
License number: NP21947
NPI: 1174828099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Group-Sd

SPAULDING, ENJOLI B

Provider ID: 262456

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Female

License number: NP21947

NPI: 1174828099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

SPAULDING, ENJOLI B , NPA

Provider ID: 269259

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Female

License number: NP21947

NPI: 1174828099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

STEARNS, PHILIP H

Provider ID: 277882

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760)

480-8770

Provider Gender: Male

License number: NP11899

NPI: 1609900810

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

VALLES, ELIZABETH A

Provider ID: 277847

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2125 CITRACADO PKWY # 200

ESCONDIDO, CA 92029-4159

Phone: (858) 966-8801

Fax: (858) 966-8511

After Hours Phone: (858)

966-8801

Provider Gender: Female

License number: NP95002921

NPI: 1609235589

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

DERMATOLOGY

DOHIL, MAGDALENE A

Provider ID: 277243

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600

Provider Gender: Female
License number: A86265
NPI: 1528139383
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHAIRER, DAVID O

Provider ID: 277850
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
License number: A148597
NPI: 1619311164
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPRAGUE, JESSICA M

Provider ID: 277894
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A134345
NPI: 1437594884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

KEARNEY, LAUREN K

Provider ID: 277832
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: G83666
NPI: 1740296268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RILEY-HAGAN, MARGARET

Provider ID: 277817
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

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D. Directorio de proveedores de atención especializada

Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROSE, OLGA D

Provider ID: 205955
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92025-6428
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VAIDYA, KAMALA

Provider ID: 205812
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92025-6428
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
License number: A124814
NPI: 1083840920
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ENDOCRINOLOGY METABOLISM DIABETES

AIKEN, MARGOT J

Provider ID: 106005
Board Certified Specialty: No
 ADVANCED METABOLIC CARE AND RESEARCH INC
 625 CITRACADO PKWY STE 108
 ESCONDIDO, CA 92025-6428
Phone: (760) 743-1431
Fax:
After Hours Phone: (760) 743-1431
Provider Gender: Female
License number: A40833
NPI: 1952476236
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: amcrclinic.com
Email:
Medical Group(s):
IPA:

BAILEY, TIMOTHY S

Provider ID: 106006
Board Certified Specialty: No
 ADVANCED METABOLIC CARE AND RESEARCH INC

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D. Directorio de proveedores de atención especializada

625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025-6428
Phone: (760) 743-1431
Fax: (760) 294-2902
After Hours Phone: (760) 743-1431
Provider Gender: Male
License number: G60763
NPI: 1194800052
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: amcrclinic.com
Email:
Medical Group(s):
IPA:

GOTTESMAN BOWEN, BETHANY L

Provider ID: 285962
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A156739
NPI: 1164849899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FAMILY PRACTICE SPORTS MEDICINE

KAUFMAN, ELIZABETH A

Provider ID: 285906
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Female
License number: A135037
NPI: 1942644679
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

FAMILY PRACTICE

SCHULTZ, JAMES H

Provider ID: 24795
Board Certified Specialty: No
NEIGHBORHOOD HEALTHCARE ESCONDIDO
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax:
After Hours Phone: (760) 520-8100
Provider Gender: Male
License number: G61829
NPI: 1356376164
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Neighborhood
Healthcare Escondido
IPA:

GASTROENTEROLOGY

CHELIMILLA, HARITHA R , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269204
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
735 E OHIO AVE STE 204
ESCONDIDO, CA 92025-3437
Phone: (760) 294-7600
Fax: (760) 294-7603
After Hours Phone: (760) 294-7600
Provider Gender: Female
License number: A124727
NPI: 1528235892
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Telugu
Cultural Competency: No
Hospital Affiliation: Hemet Global Medical Center, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOI, LILLIAN J

Provider ID: 277813
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A90646
NPI: 1831350453
Provider English Spoken: Yes

Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GARA, NAVEEN, MD

Provider ID: 269145
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025-3003
Phone: (760) 690-2800
Fax: (760) 690-2801
After Hours Phone: (760) 690-2800
Provider Gender: Male
License number: A149265
NPI: 1942406533
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Telugu
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GARCIA, MARY ABIGAIL S

Provider ID: 277804
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
License number: A89980
NPI: 1386805877
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HOM, XENIA B

Provider ID: 277854
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Female
 License number: G86642
 NPI: 1982775748
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese (Family), Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SCHWARZ, KATHLEEN B
 Provider ID: 283175
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Female
 License number: G152263
 NPI: 1265465918
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady

Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD
 Provider ID: 268690
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 330 W FELICITA AVE STE A4
 ESCONDIDO, CA 92025-6531
 Phone: (760) 489-1323
 Fax: (760) 489-0975
 After Hours Phone: (760) 489-1323
 Provider Gender: Female
 License number: HA7100
 NPI: 1063558856
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DANDURAND, JOHN M , MD

Provider ID: 269783
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 330 W FELICITA AVE STE A4
 ESCONDIDO, CA 92025-6531
 Phone: (760) 489-1323
 Fax: (760) 489-0975
 After Hours Phone: (760) 489-1323
 Provider Gender: Male
 License number: HA2056
 NPI: 1497901680
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE CRITICAL CARE MEDICINE

HIRSCH, GREGORY L , MD
 Provider ID: 269143
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 488 E VALLEY PKWY STE 211
 ESCONDIDO, CA 92025-3370
 Phone: (760) 489-1458
 Fax: (760) 489-1246
 After Hours Phone: (760) 489-1458
 Provider Gender: Male
 License number: G40467
 NPI: 1639287071
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Pomerado

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

OTOSHI, JAMES S , MD

Provider ID: 269095

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE 201

ESCONDIDO, CA 92025-3398

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)

489-1458

Provider Gender: Male

License number: G27763

NPI: 1679681027

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Palomar

Health Downtown Campus,

Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

INTERNAL MEDICINE

CHEN, MARGARET K

Provider ID: 24685

Board Certified Specialty: No

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax:

After Hours Phone: (760)

520-8100

Provider Gender: Female

License number: A61751

NPI: 1659305084

Provider English Spoken: Yes

Provider Language(s) Spoken:

Greek, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA

8AM-12PM

Website: www.ihpsocal.org

Email:

Medical Group(s): Neighborhood

Healthcare Escondido

IPA:

GREENSTEIN, JOSHUA K

Provider ID: 53809

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: A68100

NPI: 1104881457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

KHAWAR, OSMAN S

Provider ID: 53715

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: A92165

NPI: 1598813644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Urdu

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: bnmng.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

TRESTMAN, KENNETH G

Provider ID: 287047
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 230
 ESCONDIDO, CA 92029-4159
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
License number: G69663
NPI: 1346358793
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 287120
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A116982
NPI: 1447428420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 287130
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 287072
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A
Provider ID: 287062
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System

Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M
Provider ID: 287115
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Sharp Grossmont Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
RICHARDSON, ALVIE C
Provider ID: 287094
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D
Provider ID: 287082
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital,
 Grossmont Hospital, Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Tri City Medical Ctr,
 Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TARSA, MARYAM

Provider ID: 285855
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2125 CITRACADO PKWY # 210
 ESCONDIDO, CA 92029-4159
Phone: (760) 739-2921
Fax:
After Hours Phone: (760)
 739-2921
Provider Gender: Female
License number: A69894
NPI: 1295768638
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Memorial Hospital
 Encinitas, Palomar Medical
 Center, Scripps Mercy Hospital,
 Ucsd La Jolla John Sally
 Thornton, Ucsd Medical Ctr,
 Eisenhower Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TITH, TEVY

Provider ID: 287054
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Sharp Mary Birch

Hosp For Women And
 Newborns, University Of
 California Irvine Med Ctr, Sharp
 Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WESTERMANN, MELISSA L

Provider ID: 287086
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
 Birch Hosp For Women And
 Newborns, Earl And Lorraine
 Miller Childrens Hsp, Long Beach
 Memorial Med Ctr, University Of
 California Irvine Med Ctr, Sharp
 Memorial Hospital, Grossmont
 Hospital, Sharp Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No	Network	Network
♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network WILLIAMS, KRISTIN M <i>Provider ID:</i> 287112 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 200 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A72985 <i>NPI:</i> 1992847131 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health	NEONATAL / PERINATAL MEDICINE FATAYERJI, NABIL I <i>Provider ID:</i> 205750 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 <i>Phone:</i> (442) 281-2850 <i>Fax:</i> (442) 281-2999 <i>After Hours Phone:</i> (442) 281-2850 <i>Provider Gender:</i> Male <i>License number:</i> A63224 <i>NPI:</i> 1649341405 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health	GOLEMBESKI, DAVID J <i>Provider ID:</i> 205893 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 <i>Phone:</i> (442) 281-2850 <i>Fax:</i> (442) 281-2999 <i>After Hours Phone:</i> (442) 281-2850 <i>Provider Gender:</i> Male <i>License number:</i> G63111 <i>NPI:</i> 1376614131 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network LE, CRYSTAL N <i>Provider ID:</i> 283707 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-3193
 Fax: (442) 281-3197
 After Hours Phone: (442) 281-3193
 Provider Gender: Female
 License number: A97634
 NPI: 1003028416
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MOYER, LAUREL B
 Provider ID: 205400
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-3193
 Fax: (442) 281-3197
 After Hours Phone: (442) 281-3193
 Provider Gender: Female
 License number: C144070

NPI: 1598970378
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Mercy Hospital, Scripps
 Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SAUER, CHARLES W
 Provider ID: 206163
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-2850
 Fax: (442) 281-2999
 After Hours Phone: (442) 281-2850
 Provider Gender: Male
 License number: 20A9535
 NPI: 1538388988
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital,
 Palomar Health Downtown
 Campus, Southwest Healthcare
 System Murrieta, Scripps
 Memorial Hospital Encinitas,
 Palomar Medical Center, Scripps

Mercy Hospital Chula Vista,
 Pomerado Hospital, Southwest
 Healthcare System Wildomar
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SUTTNER, DENISE M
 Provider ID: 206137
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-2850
 Fax: (442) 281-2999
 After Hours Phone: (442) 281-2850
 Provider Gender: Female
 License number: A52313
 NPI: 1457433799
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital Encinitas,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Provider ID: 262222 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male License number: A68100 NPI: 1104881457 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	License number: A68100 NPI: 1104881457 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
SWEENEY, NATHALY M Provider ID: 283801 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 Phone: (442) 281-3193 Fax: (442) 281-3197 After Hours Phone: (442) 281-3193 Provider Gender: Female License number: A110761 NPI: 1164572632 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Provider ID: 283801 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 2185 CITRACADO PKWY ESCONDIDO, CA 92029-4159 Phone: (442) 281-3193 Fax: (442) 281-3197 After Hours Phone: (442) 281-3193 Provider Gender: Female License number: A110761 NPI: 1164572632 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	HEBREO, JOSEPH D Provider ID: 108435 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male License number: A93436 NPI: 1801868286 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Temecula Valley Hospital Inc Medi-Cal Open Panel: No Min/Max Age: None
NEPHROLOGY	GREENSTEIN, JOSHUA K , MD Provider ID: 53809 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male	HEBREO, JOSEPH D Provider ID: 108435 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male License number: A93436 NPI: 1801868286 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Temecula Valley Hospital Inc Medi-Cal Open Panel: No Min/Max Age: None
GREENSTEIN, JOSHUA K	Provider ID: 53809 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male	HEBREO, JOSEPH D Provider ID: 108435 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 631 E GRAND AVE ESCONDIDO, CA 92025-4402 Phone: (760) 294-1660 Fax: (760) 745-5016 After Hours Phone: (760) 294-1660 Provider Gender: Male License number: A93436 NPI: 1801868286 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Temecula Valley Hospital Inc Medi-Cal Open Panel: No Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HEBREO, JOSEPH D , MD

Provider ID: 108435

Board Certified Specialty: No

BALBOA NEPHROLOGY MED
GRP INC

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: A93436

NPI: 1801868286

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Temecula Valley
Hospital Inc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HEBREO, JOSEPH D

Provider ID: 262130

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: A93436

NPI: 1801868286

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Temecula Valley
Hospital Inc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KAYAL, ANAS

Provider ID: 262156

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)
294-1660

Provider Gender: Male

License number: A112450

NPI: 1851376917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Palomar Medical
Center, Temecula Valley Hospital
Inc, Scripps Memorial Hospital
Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

KHAWAR, OSMAN S

Provider ID: 262354

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: A92165

NPI: 1598813644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Urdu

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KHAWAR, OSMAN S , MD

Provider ID: 53715
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A92165
NPI: 1598813644
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 108420
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 108420
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE

ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEYAZ, MOHAMMED D

Provider ID: 262135
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: 20A13534
NPI: 1245459973
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Urdu

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 262182
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: G65280
NPI: 1912962275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SHAPIRO, MARK H

Provider ID: 54458
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 631 E GRAND AVE
 ESCONDIDO, CA 92025-4402
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: G65280
NPI: 1912962275
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: bnmg.org
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY CHILD

HAAS, RICHARD H

Provider ID: 205621
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NESPECA, MARK P

Provider ID: 277823
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax:
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: G65509

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1942371703
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SAHAGIAN, MICHELLE L
 Provider ID: 206076
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A80990
 NPI: 1275604035
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SATTAR, SHIFTEH
 Provider ID: 206180
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A103904
 NPI: 1750407300
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NEUROLOGY

DELANEY, MICHAEL W , MD
 Provider ID: 269104
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE
 102
 ESCONDIDO, CA 92029-4111
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760)
 631-3000
 Provider Gender: Male
 License number: C146015
 NPI: 1710157920
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Pomerado
 Hospital, Scripps Memorial
 Hospital Encinitas, Tri City
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/200
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GOLD, JEFFREY J
 Provider ID: 277870
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Male
 License number: A111541
 NPI: 1568773984
 Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

JINDAL, ANUJA V
Provider ID: 277838
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
 294-9260
Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
 Network
KIM MCMANUS, OLIVIA S
Provider ID: 277873
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
 294-9260
Provider Gender: Female
License number: A120194
NPI: 1174870067

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
 California Irvine Med Ctr,
 Childrens Hospital Of Orange
 County, Rady Childrens Hospital
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LAWLER, ABIGAIL C , MD
Provider ID: 125131
Board Certified Specialty: No
 THE NEUROLOGY CTR
 1955 CITRACADO PKWY STE
 102
 ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
 631-3000
Provider Gender: Female
License number: A152080
NPI: 1568789741
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr, Pomerado
 Hospital, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NELSON, JAMES E
Provider ID: 277849
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
 294-9260
Provider Gender: Male
License number: C55868
NPI: 1568434546
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley

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D. Directorio de proveedores de atención especializada

Childrens Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OH, IRENE J , MD

Provider ID: 76600
Board Certified Specialty: No
THE NEUROLOGY CTR
 1955 CITRACADO PKWY STE 102
 ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A106450
NPI: 1306089008
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PADUGA, REMIA S

Provider ID: 285940
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 102
 ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: A113451
NPI: 1194933853
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PHAM, ALISE K

Provider ID: 285920
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 102
 ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000
Fax: (760) 361-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A18259
NPI: 1184011363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

QUESNELL, TARA A

Provider ID: 109398
Board Certified Specialty: No
NORTH COUNTY NEUROLOGY ASSOCS MED GRP
 1955 CITRACADO PKWY STE 102
 ESCONDIDO, CA 92029-4111
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: 20A13609
NPI: 1619288172
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City

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D. Directorio de proveedores de atención especializada

Medical Ctr, Scripps Memorial
Hospital Encinitas, Palomar
Medical Center, Pomerado
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

QUESNELL, TARA A

Provider ID: 109398

Board Certified Specialty: No

NORTH COUNTY NEUROLOGY

ASSOCS MED GRP

1955 CITRACADO PKWY STE

102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax:

After Hours Phone: (760)

631-3000

Provider Gender: Female

License number: 20A13609

NPI: 1619288172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas, Palomar

Medical Center, Pomerado

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ROSENBERG, JAY H

Provider ID: 94232

Board Certified Specialty: No

THE NEUROLOGY CTR

1955 CITRACADO PKWY STE

102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Provider Gender: Male

License number: G17059

NPI: 1609804848

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHAPIRO, MARK H

Provider ID: 284030

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

631 E GRAND AVE

ESCONDIDO, CA 92025-4402

Phone: (760) 294-1660

Fax: (760) 745-5016

After Hours Phone: (760)

294-1660

Provider Gender: Male

License number: G65280

NPI: 1912962275

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Swahili

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Tri City Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

TRAUNER, DORIS A

Provider ID: 205503

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

625 CITRACADO PKWY STE

100

ESCONDIDO, CA 92025-6428

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)

294-9260

Provider Gender: Female

License number: G25519

NPI: 1124051420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
 Network

WANG, CHUNYANG T , MD

Provider ID: 84403

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE
 102

ESCONDIDO, CA 92029-4111

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
 631-3000

Provider Gender: Female

License number: A105660

NPI: 1386890770

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr, Pomerado
 Hospital, Scripps Memorial
 Hospital, Palomar Medical
 Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ZIMBRIC, MICHAEL R

Provider ID: 277891

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760)
 294-9260

Provider Gender: Male

License number: A95660

NPI: 1487819546

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
 Network

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA

Provider ID: 277174

Board Certified Specialty: No

RADY CHILDRENS HEALTH
 NETWORK
 1955 CITRACADO PKWY STE
 302

ESCONDIDO, CA 92029-4113

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760)

233-1896

Provider Gender: Female

License number: A121142

NPI: 1396066635

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Pioneers
 Memorial Hospital, El Centro
 Regional Medical Center,
 Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
 Network

BABKINA, NATALIA

Provider ID: 277175

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK

488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)

658-6101

Provider Gender: Female

License number: A121142

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1396066635
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Russian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHIARAPPA, ASHLEY M

Provider ID: 269149
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 488 E VALLEY PKWY STE 310
 ESCONDIDO, CA 92025-3373
 Phone: (760) 745-7060
 Fax: (760) 294-7784
 After Hours Phone: (760) 745-7060
 Provider Gender: Female
 License number: A164036
 NPI: 1760983092
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CIZEK, STEPHANIE M

Provider ID: 269235
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 347 W MISSION AVE
 ESCONDIDO, CA 92025-1729
 Phone: (415) 833-9183
 Fax:
 After Hours Phone: (415) 833-9183
 Provider Gender: Female
 License number: A135224
 NPI: 1346582921
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CIZMAR, BRANISLAV

Provider ID: 278908
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 488 E VALLEY PKWY STE 400
 ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101
 Fax: (760) 658-6106
 After Hours Phone: (760) 658-6101
 Provider Gender: Male
 License number: A80606
 NPI: 1679554372
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Italian, Slovak, Spanish
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital, Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CIZMAR, BRANISLAV

Provider ID: 278909
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1955 CITRACADO PKWY STE 302
 ESCONDIDO, CA 92029-4113
 Phone: (760) 233-1896
 Fax: (760) 233-1899
 After Hours Phone: (760) 233-1896
 Provider Gender: Male
 License number: A80606
 NPI: 1679554372
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Provider Language(s) Spoken:</i> Italian, Slovak, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network	1955 CITRACADO PKWY STE 302 ESCONDIDO, CA 92029-4113 <i>Phone:</i> (760) 233-1896 <i>Fax:</i> (760) 233-1899 <i>After Hours Phone:</i> (760) 233-1896 <i>Provider Gender:</i> Male <i>License number:</i> 20A13379 <i>NPI:</i> 1215170717 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network
HINSHAW, PAUL W <i>Provider ID:</i> 277040 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 1955 CITRACADO PKWY STE 302 ESCONDIDO, CA 92029-4113 <i>Phone:</i> (760) 233-1896 <i>Fax:</i> (760) 233-1899 <i>After Hours Phone:</i> (760) 233-1896 <i>Provider Gender:</i> Male <i>License number:</i> 20A13379 <i>NPI:</i> 1215170717 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Palomar Health Downtown Campus <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network	HINSHAW, PAUL W <i>Provider ID:</i> 277041 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 488 E VALLEY PKWY STE 400 ESCONDIDO, CA 92025-3378 <i>Phone:</i> (760) 658-6101 <i>Fax:</i> (760) 658-6106 <i>After Hours Phone:</i> (760) 658-6101 <i>Provider Gender:</i> Male <i>License number:</i> 20A13379 <i>NPI:</i> 1215170717 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Palomar Health Downtown Campus <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Rady Childrens Health Network	HINSHAW, PAUL W <i>Provider ID:</i> 285629 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 488 E VALLEY PKWY STE 400 ESCONDIDO, CA 92025-3378 <i>Phone:</i> (760) 658-6101 <i>Fax:</i> (760) 658-6106 <i>After Hours Phone:</i> (760) 658-6101 <i>Provider Gender:</i> Male <i>License number:</i> 20A13379 <i>NPI:</i> 1215170717 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center
HINSHAW, PAUL W <i>Provider ID:</i> 285628 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	HINSHAW, PAUL W <i>Provider ID:</i> 285628 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 276945

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

1955 CITRACADO PKWY STE
302

ESCONDIDO, CA 92029-4113

Phone: (760) 233-1896

Fax: (760) 233-1899

After Hours Phone: (760)
233-1896

Provider Gender: Female

License number: A99128

NPI: 1538146337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Palomar Medical

Center, Palomar Health

Downtown Campus, Pomerado

Hospital, Sierra Vista Regional

Med Ctr, Rady Childrens Hospital

San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

HUSKEY, DANA E

Provider ID: 276946

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

488 E VALLEY PKWY STE 400

ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)
658-6101

Provider Gender: Female

License number: A99128

NPI: 1538146337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Palomar Medical

Center, Palomar Health

Downtown Campus, Pomerado

Hospital, Sierra Vista Regional

Med Ctr, Rady Childrens Hospital

San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LAMALE-SMITH, LEAH M

Provider ID: 285518

Board Certified Specialty: No

UCSD MEDICAL GROUP

2125 CITRACADO PKWY # 210

ESCONDIDO, CA 92029-4159

Phone: (760) 739-2921

Fax: (760) 739-3162

After Hours Phone: (760)

739-2921

Provider Gender: Female

License number: A135831

NPI: 1396904876

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LEON, JOSUE D

Provider ID: 205798

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

488 E VALLEY PKWY STE 400

ESCONDIDO, CA 92025-3378

Phone: (760) 658-6101

Fax:

After Hours Phone: (760)

658-6101

Provider Gender: Male

License number: A80635

NPI: 1497799092

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMS, MONA N
Provider ID: 277880
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL J
Provider ID: 214190
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 206
 ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
License number: A124825
NPI: 1760776728
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BANSAL, PREETI
Provider ID: 277883
Board Certified Specialty: No

BHATIA, SHAGUN K
Provider ID: 277877
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

BINDER, NICHOLAS R , MD
Provider ID: 268756
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
 743-5872
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

BOKOSKY, JOHN E
Provider ID: 54001
Board Certified Specialty: No
 EYE CARE OF SAN DIEGO
 MED OFFICE
 700 W EL NORTE PKWY
 ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760)
 738-7800
Provider Gender: Male
License number: G51651
NPI: 1245215748

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CHOPLIN, NEIL T
Provider ID: 54049
Board Certified Specialty: No
 EYE CARE OF SAN DIEGO

MED OFFICE
 700 W EL NORTE PKWY
 ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760)
 738-7800
Provider Gender: Male
License number: G57042
NPI: 1144205642
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCGRRAW, JOSEPH P , MD
Provider ID: 269705
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
 898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262446
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268956

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MOLL, ANGELA M

Provider ID: 205895
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax:
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MOLL, ANGELA M

Provider ID: 277824
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MORRISON-REYES, JOSHUA A

Provider ID: 107935
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS MED GRP
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269179
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORTON, ASA D

Provider ID: 54311
Board Certified Specialty: No
 EYE CARE OF SAN DIEGO
 MED OFFICE

700 W EL NORTE PKWY
 ESCONDIDO, CA 92026-3923
Phone: (760) 738-7800
Fax: (619) 296-4622
After Hours Phone: (760) 738-7800
Provider Gender: Male
License number: G68919
NPI: 1780669283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOVAGHAR, MANSOOR

Provider ID: 277833
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
License number: A100897
NPI: 1497792220
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

OHALLORAN, HENRY S

Provider ID: 277869

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PANSARA, MEGHA L

Provider ID: 286603

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)

755-7600

Provider Gender: Female

License number: A143429

NPI: 1184983728

Provider English Spoken: Yes

Provider Language(s) Spoken:
Gujarati, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Pomerado Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PATEL, GITANE

Provider ID: 262319

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax:

After Hours Phone: (760)
743-5872

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE, MD

Provider ID: 268741

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax:

After Hours Phone: (760)
743-5872

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Gujarati, Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Paradise Valley

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MEDICAL GROUP-SD 830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
PATEL, SARJAN H <i>Provider ID:</i> 262407 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	PATEL, SARJAN H , MD <i>Provider ID:</i> 268802 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	PRABHU, SUJATA P , MD <i>Provider ID:</i> 268920 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A115965
PRABHU, SUJATA P <i>Provider ID:</i> 262393 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS	PRABHU, SUJATA P <i>Provider ID:</i> 262393 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1982872552
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SCHER, COLIN A

Provider ID: 277862
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Male
 License number: A42700
 NPI: 1396816153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center,

Grossmont Hospital, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R

Provider ID: 206084
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY STE 206
 ESCONDIDO, CA 92025-6428
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Female
 License number: A134647
 NPI: 1760707657
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NATION, JAVAN J

Provider ID: 277844
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
 Provider Gender: Male

License number: A125279
 NPI: 1043478902
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OTOLARYNGOLOGY

BLISS, MORGAN R

Provider ID: 277537
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

FITZGERALD, PATRICK J , MD
Provider ID: 269266
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4112
Phone: (858) 485-7870
Fax: (858) 485-6473
After Hours Phone: (858)
485-7870
Provider Gender: Male
License number: G80210
NPI: 1790882728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Health

Downtown Campus, Pomerado
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRIESEN, TZYYNONG L
Provider ID: 277853
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A152327
NPI: 1952740177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

JIANG, WEN A

Provider ID: 277860
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A99198
NPI: 1659305753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LEUIN, SHELBY C
Provider ID: 206110
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025-6428
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: A112930

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1124230909
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA E
 Provider ID: 205689
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A125568
 NPI: 1023329885
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SILVA SEPULVEDA, JOSE A
 Provider ID: 206298
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Male
 License number: A120119
 NPI: 1417222472
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

HALEY, JESSICA E
 Provider ID: 205689
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A125568
 NPI: 1023329885
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SUN, HEATHER Y
 Provider ID: 206145
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 625 CITRACADO PKWY STE
 100
 ESCONDIDO, CA 92025-6428
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760)
 294-9260
 Provider Gender: Female
 License number: A107943
 NPI: 1811173883
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC DERMATOLOGY

BARRIO, VICTORIA R
 Provider ID: 277856
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 License number: A91617
 NPI: 1598836355
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BOIKO, SUSAN

Provider ID: 277158
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
755-7600
Provider Gender: Female
License number: G41069
NPI: 1053488981
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC INFECTIOUS DISEASES

CHRISTMAN, JAMESINA C

Provider ID: 277821
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760)
739-1543
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/19
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC ORTHOPEDICS

UPASANI, VIDYADHAR V

Provider ID: 205918
Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK
625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025-6428
Phone: (855) 966-6789
Fax:

After Hours Phone: (855)
966-6789
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

DUONG, THU A

Provider ID: 277857
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760)
739-1543
Provider Gender: Female
License number: A127187
NPI: 1326309881

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC RHEUMATOLOGY

CHIRASEVEENUPRAPUND, PETER

Provider ID: 277906
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
 294-9260
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRICS

AJAYI, TOLUWALASE A

Provider ID: 205718
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442)
 281-2850
Provider Gender: Female
License number: A121454
NPI: 1316175912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital Chula Vista,
 Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CAMERON, MELISSA A

Provider ID: 116006
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax:
After Hours Phone: (442)
 281-2850
Provider Gender: Female
License number: A125249
NPI: 1902983752
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CAMERON, MELISSA A

Provider ID: 205966
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442)
 281-2850

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A125249
NPI: 1902983752
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Health Downtown
 Campus, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DE LA ROSA, IVONNE E

Provider ID: 206029
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442)
 281-2850
Provider Gender: Female
License number: A49734
NPI: 1174695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital, Sharp
 Memorial Hospital, Rady
 Childrens Hospital San Diego, El

Centro Regional Medical Center,
 Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

FATAYERJI, NABIL I

Provider ID: 52508
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax:
After Hours Phone: (442)
 281-2850
Provider Gender: Male
License number: A63224
NPI: 1649341405
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Pomerado Hospital, Southwest
 Healthcare System Wildomar,
 Southwest Healthcare System
 Murrieta, Palomar Medical
 Center, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Memorial Hospital
 Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GOLEMBESKI, DAVID J

Provider ID: 52528
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax:
After Hours Phone: (442)
 281-2850
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Encinitas, Pomerado Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Palomar
 Medical Center, Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MOYER, LAUREL B

Provider ID: 116076
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850

Fax:
After Hours Phone: (442) 281-2850
Provider Gender: Female
License number: C144070
NPI: 1598970378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARKER, PAUL C

Provider ID: 205757
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2185 CITRACADO PKWY

ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: A54747
NPI: 1841202710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Marian Regional Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAUER, CHARLES W

Provider ID: 52544
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
Phone: (442) 281-2850

Fax:
After Hours Phone: (442) 281-2850
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Pomerado Hospital, Scripps Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275660
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 625 CITRACADO PKWY
 ESCONDIDO, CA 92025-6428
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
License number: A170177
NPI: 1447645742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 102 ESCONDIDO, CA 92029-4111 <i>Phone:</i> (760) 631-3000 <i>Fax:</i> (760) 631-3016 <i>After Hours Phone:</i> (760) 631-3000 <i>Provider Gender:</i> Female <i>License number:</i> PA58612 <i>NPI:</i> 1386260842 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
PHYSICIANS ASSISTANT		
ASARO, AMANDA M <i>Provider ID:</i> 277871 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 100 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 480-8770 <i>Fax:</i> (760) 480-8811 <i>After Hours Phone:</i> (760) 480-8770 <i>Provider Gender:</i> Female <i>License number:</i> PA18493 <i>NPI:</i> 1306961313 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	CHATFIELD, ALEXANDRA J <i>Provider ID:</i> 276716 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1955 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029-4112 <i>Phone:</i> (760) 743-4789 <i>Fax:</i> (858) 673-5187 <i>After Hours Phone:</i> (760) 743-4789 <i>Provider Gender:</i> Female <i>License number:</i> PA57107 <i>NPI:</i> 1215584628 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i>	DICKINSON, ALLISON J <i>Provider ID:</i> 277863 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 2125 CITRACADO PKWY # 100 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 480-8770 <i>Fax:</i> (760) 480-8811 <i>After Hours Phone:</i> (760) 480-8770 <i>Provider Gender:</i> Female <i>License number:</i> PA17163 <i>NPI:</i> 1972655389 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
BURNEY, MELISSA A <i>Provider ID:</i> 285891 <i>Board Certified Specialty:</i> No	FLOCO, VIRGINIA A <i>Provider ID:</i> 277864 <i>Board Certified Specialty:</i> No	

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LAZAR, ANITA A
Provider ID: 277805
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
 755-7600
Provider Gender: Female
License number: PA55984
NPI: 1609208198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MCCAULEY, KRISTINA R
Provider ID: 277875
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
 755-7600
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MUNCH, LINH D
Provider ID: 277843
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760)
 480-8770
Provider Gender: Female
License number: PA14223
NPI: 1679792725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

NGUYEN, CECILIA
Provider ID: 289158
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760)
 755-7600
Provider Gender: Female
License number: PA57419

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

NPI: 1629636816
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PAIK, CHRISTINA N
 Provider ID: 277803
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760)
 480-8770
 Provider Gender: Female
 License number: PA21680
 NPI: 1174811475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health
 Network
ROSS, ANNE T
 Provider ID: 269221
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 737-2035
 Fax: (760) 520-8314
 After Hours Phone: (760)
 737-2035
 Provider Gender: Female
 License number: PA53359
 NPI: 1447334883
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SANCHEZ, RAQUEL
 Provider ID: 277886
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 480-8770
 Fax: (760) 480-8811
 After Hours Phone: (760)
 480-8770
 Provider Gender: Female
 License number: PA14357

NPI: 1356560650
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

VILLAPANDO, NORMA O
 Provider ID: 277904
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760)
 755-7600
 Provider Gender: Female
 License number: PA56098
 NPI: 1376947960
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

PODIATRIST

FARMER, STEVEN G

Provider ID: 268975
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
Provider Gender: Male
License number: DPM2895
NPI: 1215087770
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NEGRON, RICARDO J , MD

Provider ID: 274646
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200
Fax: (360) 462-2749
After Hours Phone: (760) 520-8200
Provider Gender: Male
License number: DPM5260
NPI: 1932548393
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Providence St Joseph Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PULMONARY DISEASES

BENDER, FRANK D

Provider ID: 257558
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
License number: G33933
NPI: 1912015363
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado

Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

BENDER, FRANK D , MD

Provider ID: 53988
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
License number: G33933
NPI: 1912015363
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Palomar Health Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

HIRSCH, GREGORY L

Provider ID: 286970
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 201
ESCONDIDO, CA 92025-3398
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458
Provider Gender: Male
License number: G40467
NPI: 1639287071
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Pomerado
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POPPER, STEVEN T , MD

Provider ID: 204438
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 211
ESCONDIDO, CA 92025-3370
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458

Provider Gender: Male
License number: A127156
NPI: 1679849012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Kaiser
Foundation Hospital Bellflower,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POPPER, STEVEN T

Provider ID: 276725
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
488 E VALLEY PKWY STE 201
ESCONDIDO, CA 92025-3398
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458
Provider Gender: Male
License number: A127156
NPI: 1679849012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Kaiser
Foundation Hospital Bellflower,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

QUAN, MICHELE G

Provider ID: 287097
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 230
ESCONDIDO, CA 92029-4159
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
489-1458
Provider Gender: Female
License number: A152133
NPI: 1629462882
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Redlands
Community Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIATION ONCOLOGY

COLEMAN, LORI A , MD

Provider ID: 221090
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2125 CITRACADO PKWY # 110

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D. Directorio de proveedores de atención especializada

ESCONDIDO, CA 92029-4159
Phone: (760) 735-7800
Fax: (760) 735-7810
After Hours Phone: (760) 735-7800
Provider Gender: Female
License number: G78635
NPI: 1053348920
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD
Provider ID: 220044
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760) 739-3371
Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Palomar

Medical Center, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FULLER, DONALD B , MD
Provider ID: 269237
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

IJAZ, TAHIR, MD
Provider ID: 269244
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: A52748
NPI: 1225036742
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: St Agnes Medical Center, Alvarado Hospital Llc, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD
Provider ID: 268786
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax: (760) 739-3779
After Hours Phone: (760) 739-3371
Provider Gender: Male
License number: A99269
NPI: 1720314107
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEJAVAR, SUNANDA M , MD
Provider ID: 221076
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760) 739-3371
Provider Gender: Female
License number: A103733
NPI: 1912232513
Provider English Spoken: Yes
Provider Language(s) Spoken: Kannada, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital, Sharp Memorial
 Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIRAZI, REZA, MD
Provider ID: 269248
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIRAZI, REZA
Provider ID: 54453
Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 701 E GRAND AVE STE 200
 ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax:
After Hours Phone: (760) 839-7370
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

UHL, BARRY M , MD

Provider ID: 243529
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax: (760) 739-3779
After Hours Phone: (760) 739-3371
Provider Gender: Male
License number: A71969
NPI: 1811936693
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VOLPP, PAUL B , MD

Provider ID: 221103
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 735-7800
Fax: (760) 735-7810
After Hours Phone: (760) 735-7800
Provider Gender: Male
License number: A86307

NPI: 1225186232

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD

Provider ID: 220041
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2125 CITRACADO PKWY # 110
 ESCONDIDO, CA 92029-4159
Phone: (760) 739-3371
Fax:
After Hours Phone: (760) 739-3371
Provider Gender: Male
License number: A54109
NPI: 1841233947
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):

No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

NALBANDIAN, ALLEN B

Provider ID: 29148
Board Certified Specialty: No
VALLEY RADIOLOGY CONSULTANTS MED GRP INC
 255 N ELM ST STE 102
 ESCONDIDO, CA 92025-3431
Phone: (760) 739-5400
Fax:
After Hours Phone: (760) 739-5400
Provider Gender: Male
License number: A54742
NPI: 1619938099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 7AM-9PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNG, RAYMOND Y

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D. Directorio de proveedores de atención especializada

Provider ID: 123332
Board Certified Specialty: No
VALLEY RADIOLOGY
CONSULTANTS MED GRP INC
255 N ELM ST STE 102
ESCONDIDO, CA 92025-3431
Phone: (760) 739-5400
Fax:
After Hours Phone: (760)
739-5400
Provider Gender: Male
License number: A63965
NPI: 1023079365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Scripps Green Hospital,
Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7AM-9PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY

VAKILIAN, SIAVOSH

Provider ID: 283206
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025-4466
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760)
839-7370
Provider Gender: Male
License number: A133482

NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

CULLISON, KALEB B

Provider ID: 269216
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
255 N ELM ST STE 202
ESCONDIDO, CA 92025-3431
Phone: (760) 504-0223
Fax: (760) 504-0224
After Hours Phone: (760)
504-0223
Provider Gender: Male
License number: PT38863
NPI: 1326306762
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MC GEE, JACQUELINE M

Provider ID: 252473
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027-2550
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760)
434-6100
Provider Gender: Female
License number: PT294790
NPI: 1194217133

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 8/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MEISTER, SARAH

Provider ID: 269213
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027-2550
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760)
434-6100
Provider Gender: Female
License number: PT291898

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D. Directorio de proveedores de atención especializada

NPI: 1376091561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PARKER, CORY

Provider ID: 269227
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1815 E VALLEY PKWY STE 5
 ESCONDIDO, CA 92027-2550
Phone: (760) 434-6100
Fax: (760) 434-4583
After Hours Phone: (760)
 434-6100
Provider Gender: Male
License number: PT296440
NPI: 1194288126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RHEUMATOLOGY

RAO, SOUMYA G , MD
Provider ID: 269101
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 488 E VALLEY PKWY STE 211
 ESCONDIDO, CA 92025-3370
Phone: (858) 675-3150
Fax: (858) 924-1775
After Hours Phone: (858)
 675-3150
Provider Gender: Female
License number: A99911
NPI: 1033388616
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Kannada, Russian,
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Chula
 Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHEETS, ROBERT M

Provider ID: 277890
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760)
 294-9260
Provider Gender: Male
License number: G31567

NPI: 1013088772
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SURGERY CARDIOVASCULAR

LIN, YUAN H , MD

Provider ID: 241290
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE
 300
 ESCONDIDO, CA 92029-4113
Phone: (619) 823-3146
Fax: (619) 554-8500
After Hours Phone: (619)
 823-3146
Provider Gender: Male
License number: A43050
NPI: 1487650412
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cantonese, Mandarin, Yue
 Chinese
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Grossmont
 Hospital, Palomar Health
 Downtown Campus
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ONAITIS, MARK

Provider ID: 210299
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029-4159
 Phone: (442) 281-5000
 Fax:
 After Hours Phone: (442) 281-5000
 Provider Gender: Male
 License number: C144886
 NPI: 1841310638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SURGERY GENERAL VASCULAR

BULKIN, ANATOLY J , MD

Provider ID: 51838

Board Certified Specialty: No
 SURGICAL ASSOCS OF SAN DIEGO PROF CORP
 625 CITRACADO PKWY STE 203
 ESCONDIDO, CA 92025-6428
 Phone: (760) 739-7666
 Fax: (760) 739-7633
 After Hours Phone: (760) 739-7666
 Provider Gender: Male
 License number: G79826
 NPI: 1275593154
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHANG, ALEXANDER T , MD

Provider ID: 75855
 Board Certified Specialty: No
 SURGICAL ASSOCS OF SAN DIEGO PROF CORP
 625 CITRACADO PKWY STE 203
 ESCONDIDO, CA 92025-6428
 Phone: (760) 739-7666
 Fax: (760) 739-7633
 After Hours Phone: (760) 739-7666
 Provider Gender: Male
 License number: A123245

NPI: 1376860056
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NEMCEFF, DENNIS, MD

Provider ID: 246553
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 625 CITRACADO PKWY STE 203
 ESCONDIDO, CA 92025-6428
 Phone: (760) 739-7666
 Fax: (760) 739-7633
 After Hours Phone: (760) 739-7666
 Provider Gender: Male
 License number: A123910
 NPI: 1427371228
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: No
 Hospital Affiliation: Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

CHANG, ALEXANDER T

Provider ID: 75855
Board Certified Specialty: No
SURGICAL ASSOCS OF SAN DIEGO PROF CORP
625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025-6428
Phone: (760) 739-7666
Fax:
After Hours Phone: (760) 739-7666
Provider Gender: Male
License number: A123245
NPI: 1376860056
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Hours: M-F 7AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GROVE, JAY R , MD

Provider ID: 245226
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (760) 300-3647
Fax:
After Hours Phone: (760) 300-3647
Provider Gender: Male
License number: A60426
NPI: 1912971334
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Tri City Medical Ctr, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY HAND

PATEL, ARUSH A , MD

Provider ID: 77773
Board Certified Specialty: No
ARCH HEALTH PARTNERS
1955 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029-4112

Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
License number: A105982
NPI: 1487892352
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D

Provider ID: 244140
Board Certified Specialty: No
UCSD MEDICAL GROUP
1955 CITRACADO PKWY STE 102
ESCONDIDO, CA 92029-4111
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

STERN, MARK S , MD

Provider ID: 243486

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
705 E OHIO AVE

ESCONDIDO, CA 92025-3418

Phone: (760) 489-9490

Fax: (760) 489-7638

After Hours Phone: (760)

489-9490

Provider Gender: Male

License number: G47596

NPI: 1649282765

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SURGERY ORTHOPEDIC

ANDERSON, JUSTIN

Provider ID: 289122

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760)
480-8770

Provider Gender: Male

License number: PA60229

NPI: 1366105074

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado Hosp Med Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BARBA, DANIEL, MD

Provider ID: 77895

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
1955 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029-4112

Phone: (760) 743-4789

Fax: (760) 743-4779

After Hours Phone: (760)
743-4789

Provider Gender: Male

License number: A119351

NPI: 1407128580

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado Hospital, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CHAMBERS, HENRY G

Provider ID: 277814

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

2125 CITRACADO PKWY # 100
ESCONDIDO, CA 92029-4159

Phone: (760) 480-8770

Fax: (760) 480-8811

After Hours Phone: (760)
480-8770

Provider Gender: Male

License number: A44985

NPI: 1205907060

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMONDS, ERIC W

Provider ID: 277831
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIMBALL, MICHAEL P , MD

Provider ID: 122878

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 457 N ELM ST
 ESCONDIDO, CA 92025-3001
Phone: (858) 455-6460
Fax: (858) 455-5362
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KNUTSON, THOMAS R , MD

Provider ID: 31099
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (760) 743-4779
After Hours Phone: (760) 743-4789
Provider Gender: Male
License number: G50268

NPI: 1962409938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OWSLEY, KEVIN C , MD

Provider ID: 269326
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1955 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4112
Phone: (858) 485-0050
Fax: (858) 485-5071
After Hours Phone: (858) 485-0050
Provider Gender: Male
License number: A98739
NPI: 1992714406
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Marina Del Rey Hospital, Palomar Medical Center, Adventist Health White Memorial
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PENNOCK, ANDREW T

Provider ID: 277874
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 480-8770
Provider Gender: Male
License number: A90049
NPI: 1619151685
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SHARP, LORRA M , MD

Provider ID: 243552
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE
 200
 ESCONDIDO, CA 92029-4112
Phone: (760) 743-4789
Fax: (858) 673-5187
After Hours Phone: (760)
 743-4789
Provider Gender: Female
License number: A117353
NPI: 1689689176
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Pomona
 Valley Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WALLACE, CHARLES D

Provider ID: 277829
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760)
 480-8770
Provider Gender: Male
License number: G67953
NPI: 1144229600
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego,
 Parkview Community Hospital
 Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

YASZAY, BURT

Provider ID: 277839
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2125 CITRACADO PKWY # 100
 ESCONDIDO, CA 92029-4159
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760)
 480-8770
Provider Gender: Male
License number: A100336
NPI: 1770798647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

SURGERY PEDIATRIC

KLING, KAREN M

Provider ID: 206130

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025-6428

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Provider Gender: Female

License number: A53583

NPI: 1982775144

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp Mary

Birch Hosp For Women And

Newborns, National Naval Med

Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

UROLOGY

CHIANG, GEORGE

Provider ID: 277830

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

2125 CITRACADO PKWY # 100

ESCONDIDO, CA 92029-4159

Phone: (760) 739-1543

Fax: (760) 294-9274

After Hours Phone: (760)

739-1543

Provider Gender: Male

License number: A98687

NPI: 1093773954

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Parkview Community Hospital

Medical Center, Northern Inyo

Hosp

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

COHEN, EDWARD S , MD

Provider ID: 269341

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY STE

302

ESCONDIDO, CA 92029-4113

Phone: (760) 743-5111

Fax:

After Hours Phone: (760)

743-5111

Provider Gender: Male

License number: G56844

NPI: 1093756827

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital, Ucsd

Medical Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FALLBROOK

DERMATOLOGY

ROSS, ANDREW L , MD

Provider ID: 269334

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1309 S MISSION RD STE A

FALLBROOK, CA 92028-4168

Phone: (760) 728-7546

Fax: (760) 723-6208

After Hours Phone: (760)

728-7546

Provider Gender: Male

License number: A140430

NPI: 1700140738

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A , MD

Provider ID: 269328
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1309 S MISSION RD STE A
 FALLBROOK, CA 92028-4168
Phone: (760) 728-7546
Fax: (760) 723-6208
After Hours Phone: (760)
 728-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NEPHROLOGY

HEBREO, JOSEPH D

Provider ID: 262131
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 591 E ELDER ST STE C
 FALLBROOK, CA 92028-5001

Phone: (760) 967-9900
Fax: (760) 745-5016
After Hours Phone: (760)
 967-9900
Provider Gender: Male
License number: A93436
NPI: 1801868286
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Temecula Valley
 Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

PHYSICIANS ASSISTANT

GORDON, BENJAMIN S

Provider ID: 261023
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 1107 S MISSION RD
 FALLBROOK, CA 92028-3224
Phone: (760) 451-0070
Fax: (760) 451-1499
After Hours Phone: (760)
 451-0070
Provider Gender: Male
License number: PA17205
NPI: 1821184078
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SERING, MALIA A , NPA

Provider ID: 269279
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1309 S MISSION RD STE A
 FALLBROOK, CA 92028-4168
Phone: (760) 728-7546
Fax: (760) 723-6208
After Hours Phone: (760)
 728-7546
Provider Gender: Female
License number: PA19459
NPI: 1013198720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

KAPLAN, CHRISTOPHER C

Provider ID: 269187
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 521 E ELDER ST STE 106
 FALLBROOK, CA 92028-3082
 Phone: (760) 723-8337
 Fax: (760) 723-8337
 After Hours Phone: (760) 723-8337
 Provider Gender: Male
 License number: PT292488
 NPI: 1144764820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

IMPERIAL BEACH

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287101
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 600 PALM AVE STE 126
 IMPERIAL BEACH, CA
 91932-1246
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
 Provider Gender: Female

License number: PT300083
 NPI: 1699357525
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NOVENCIDO, ANDREW

Provider ID: 286783
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 600 PALM AVE STE 126
 IMPERIAL BEACH, CA
 91932-1246
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619) 482-3000
 Provider Gender: Male

License number: PT295915
 NPI: 1447723937
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SHEFFIELD, TIFFANY

Provider ID: 255403
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 600 PALM AVE STE 126
 IMPERIAL BEACH, CA
 91932-1246
 Phone: (619) 482-3000
 Fax:
 After Hours Phone: (619) 482-3000
 Provider Gender: Female
 License number: PT296953
 NPI: 1134774342
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LA JOLLA

CERTIFIED NURSE PRACTITIONER

NORTON, SARAH E

Provider ID: 207058
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP95010335
NPI: 1730659756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FAMILY PRACTICE

CHEN, ALICE I

Provider ID: 207166
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 MEDICAL CENTER DR
 LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

KO, KIMBERLY J

Provider ID: 214507
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 MEDICAL CENTER DR
 LA JOLLA, CA 92037
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A77120
NPI: 1437448917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE N

Provider ID: 284296
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9333 GENESEE AVE, STE 340
 LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A173043
NPI: 1295263861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LA MESA

HEMATOLOGY / ONCOLOGY

BATRA, REEMA, MD

Provider ID: 58612
Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619) 644-3030
Provider Gender: Female
License number: A118846

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1629286505
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Mandarin
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BODKIN, DAVID J , MD

Provider ID: 44084
 Board Certified Specialty: Yes
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 644-3030
 Fax: (619) 644-3638
 After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: G62107
 NPI: 1134280605
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French, Hindi, Korean, Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc
ZU, KAI
 Provider ID: 43199
 Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 644-3030
 Fax:
 After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: A74842
 NPI: 1164583639
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ZU, KAI, MD

Provider ID: 43199
 Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 644-3030
 Fax:
 After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: A74842
 NPI: 1164583639
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 644-3030
 Fax: (619) 644-3638
 After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: A74842
 NPI: 1164583639
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE

BODKIN, DAVID J

Provider ID: 44084
 Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 644-3030
 Fax: (619) 644-3638
 After Hours Phone: (619) 644-3030
 Provider Gender: Male
 License number: G62107
 NPI: 1134280605
 Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Arabic, French, Hindi, Korean,
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ONCOLOGY MEDICAL

BATRA, REEMA

Provider ID: 58612
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR, DO NOT USE
LA MESA, CA 91942
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: A118846
NPI: 1629286505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Mandarin
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MEDIC, IGOR
Provider ID: 119509
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR, DO NOT USE
LA MESA, CA 91942
Phone: (619) 644-3030
Fax:

After Hours Phone: (619)
644-3030
Provider Gender: Male
License number: A146970
NPI: 1154618593
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Serbian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PHYSICIANS ASSISTANT

ELO, KRISTIN M

Provider ID: 55181
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR, DO NOT USE
LA MESA, CA 91942
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA19305
NPI: 1164664306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WRAY, AMY G

Provider ID: 118286
Board Certified Specialty: No
CANCER CENTER ONCOLOGY
MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR, DO NOT USE
LA MESA, CA 91942
Phone: (619) 644-3030
Fax:
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA17578

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D. Directorio de proveedores de atención especializada

NPI: 1396762076
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No

♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RADIATION ONCOLOGY

UHL, BARRY M , MD

Provider ID: 204684
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 740-4500
 Fax: (619) 740-8499
 After Hours Phone: (619)
 740-4500
 Provider Gender: Male
 License number: A71969
 NPI: 1811936693
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Sharp Chula
 Vista Med Ctr, Sharp Memorial
 Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 19/100
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RADIOLOGY

VIETS, RYAN B

Provider ID: 268951
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR, DO NOT USE
 LA MESA, CA 91942
 Phone: (619) 740-5100
 Fax: (619) 740-5150
 After Hours Phone: (619)
 740-5100
 Provider Gender: Male
 License number: A125809
 NPI: 1568617108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Tri City Medical Ctr,
 Scripps Green Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

UROLOGY

DATO, PAUL E , MD

Provider ID: 269142
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 655 EUCLID AVE, STE 301
 LA MESA, CA 91942
 Phone: (619) 697-2456
 Fax: (858) 429-7930
 After Hours Phone: (619)
 697-2456
 Provider Gender: Male
 License number: A43540
 NPI: 1588632715
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Sharp Grossmont
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LA JOLLA

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY N

Provider ID: 246312
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL
 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A156242
NPI: 1346515442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SILVA ENCISO, JORGE E
Provider ID: 120489
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A117426
NPI: 1639404031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Pioneers Memorial Hospital, El Centro Regional Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALLERGY IMMUNOLOGY

BROIDE, DAVID H
Provider ID: 65132
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax: (858) 657-8723
After Hours Phone: (858) 657-8322
Provider Gender: Male
License number: A38964
NPI: 1760422992
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOHERTY, TAYLOR A
Provider ID: 65163
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (858) 657-8322
Fax: (858) 657-8723
After Hours Phone: (858) 657-8322
Provider Gender: Male
License number: A86650
NPI: 1225015845
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOFFMAN, HAROLD M
Provider ID: 65192
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1A
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A53101
NPI: 1326074261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SMITH, TUKISA D

Provider ID: 255602
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-5350
 Fax:
 After Hours Phone: (858) 657-5350
 Provider Gender: Female
 License number: A165499
 NPI: 1205194198

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WASSERMAN, STEPHEN I

Provider ID: 65321
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619) 543-2347
 Provider Gender: Male
 License number: A23431
 NPI: 1588612154
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ZURAW, BRUCE L

Provider ID: 65331
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8723
 Fax:
 After Hours Phone: (858) 657-8723
 Provider Gender: Male
 License number: G47065
 NPI: 1780634261
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ☞ Accessibility: W

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANESTHESIOLOGY PAIN MANAGEMENT

CASTELLANOS, JOEL

Provider ID: 243554
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A154199
 NPI: 1700296514
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ANESTHESIOLOGY

OSWALD, JESSICA C

Provider ID: 239601
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A130925
 NPI: 1427315118
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TRIVEDI, SURAJ S

Provider ID: 246750
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A122196
 NPI: 1699057885
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TZENG, ERIC

Provider ID: 284578
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A153819
 NPI: 1801258264
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CARDIOLOGY

AIZIN, VITALI

Provider ID: 124981
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 9834 GENESEE AVE STE 101
 LA JOLLA, CA 92037-1214
 Phone: (858) 430-8455
 Fax: (858) 433-6946
 After Hours Phone: (858) 430-8455
 Provider Gender: Male
 License number: A82761
 NPI: 1366545733
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

AL KHIAMI, BELAL O

Provider ID: 127143
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530
 Fax:
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 License number: A141418
 NPI: 1861623506

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Pioneers Memorial Hospital, El Centro Regional Medical Center, Loma Linda University Med Ctr Murrieta, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AL KHIAMI, BELAL O

Provider ID: 275993
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A141418
NPI: 1861623506
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Pioneers Memorial Hospital, El Centro Regional Medical Center, Loma Linda

University Med Ctr Murrieta, Temecula Valley Hospital Inc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COTTER, BRUNO R

Provider ID: 65154
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A67069
NPI: 1205886389
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GREENBERG, BARRY H

Provider ID: 65180
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: G29316
NPI: 1093773137
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOFFMAYER, KURT S

Provider ID: 110437
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A98256
NPI: 1841322195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KIM, PAUL J

Provider ID: 120632

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858) 657-8530

Provider Gender: Male

License number: A109213

NPI: 1417104837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KIM, PAUL J

Provider ID: 210202

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A109213

NPI: 1417104837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KIM, PAUL J

Provider ID: 244997

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A109213

NPI: 1417104837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MIZZELL, ANNA M

Provider ID: 214021

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL 1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Female

License number: A112810

NPI: 1851561021

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

MIZZELL, ANNA M

Provider ID: 83365

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A112810

NPI: 1851561021

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MIZZELL, ANNA M

Provider ID: 84119

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A112810

NPI: 1851561021

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NAREZKINA, ANNA D

Provider ID: 110162

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (858) 657-8530

Fax: (858) 657-8814

After Hours Phone: (858)

657-8530

Provider Gender: Female

License number: A113210

NPI: 1891958773

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Pioneers Memorial

Hospital, El Centro Regional

Medical Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PHREANER, NICHOLAS J

Provider ID: 224864

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A126789

NPI: 1023373040

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TAUB, PAM R

Provider ID: 277681

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A89612
 NPI: 1346355161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TAUB, PAM R

Provider ID: 277682
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A89612
 NPI: 1346355161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

UREY, MARCUS A
 Provider ID: 120573
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530
 Fax:
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 License number: A148944
 NPI: 1972820058
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WALTERS, DANIEL

Provider ID: 240403
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A129565
 NPI: 1659665461
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WETTERSTEN, NICHOLAS W

Provider ID: 210604
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8630
 Fax: (858) 657-8814
 After Hours Phone: (858) 657-8630
 Provider Gender: Male
 License number: A122511
 NPI: 1063701068
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARDIOVASCULAR DISEASE

ADLER, ERIC D
Provider ID: 64793
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax: (858) 657-8021
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A116525
NPI: 1477699601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ADLER, ERIC D
Provider ID: 65369
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-8021
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A116525
NPI: 1477699601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAHADORANI, JOHN N
Provider ID: 101235
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A123767
NPI: 1780883082

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BARNARD, DENISE D
Provider ID: 65123
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax: (858) 657-8021
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: G65241
NPI: 1669497731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

BEN YEHUDA, ORI

Provider ID: 65125
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A51936
NPI: 1508912387
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BERMAN, BRETT J

Provider ID: 101016
Board Certified Specialty: No
INTEGRATIVE
CARDIOVASCULAR CENTER
OF LA JOLLA
9834 GENESEE AVE STE 101
LA JOLLA, CA 92037-1214
Phone: (858) 430-8455
Fax: (858) 433-6943
After Hours Phone: (858) 430-8455
Provider Gender: Female
License number: A78854
NPI: 1457446684
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DANIELS, LORI B

Provider ID: 65157
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: A74503
NPI: 1295755080
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEMARIA, ANTHONY N

Provider ID: 65160
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: G20471
NPI: 1124043948
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FELD, GREGORY K

Provider ID: 70155
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KRUMMEN, DAVID E

Provider ID: 65223
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
 657-8530
Provider Gender: Male
License number: A81261
NPI: 1235152885
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:
MAHMUD, EHTISHAM
Provider ID: 65244
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
 657-8530
Provider Gender: Male
License number: G75925
NPI: 1730112335
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Urdu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, MITUL P

Provider ID: 65009
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000

Provider Gender: Male
License number: A95406
NPI: 1457572448
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, MITUL P

Provider ID: 65376
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL
 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A95406
NPI: 1457572448
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TSIMIKAS, SOTIRIOS

Provider ID: 65312
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 1D
LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858)
657-8530
Provider Gender: Male
License number: G73170
NPI: 1629124417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

AGYEMANG, ALBERTA A

Provider ID: 265130
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95002195
NPI: 1023400082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AGYEMANG, ALBERTA A

Provider ID: 265131
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax: (858) 657-8387
After Hours Phone: (858)
657-8000
Provider Gender: Female
License number: NP95002195
NPI: 1023400082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ATTIA, JILL M

Provider ID: 83197
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-2124
Fax: (858) 534-4813
After Hours Phone: (858)
822-2124
Provider Gender: Female
License number: NP16882
NPI: 1275598591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ATTIA, JILL M

Provider ID: 83198
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 822-2124
 Fax: (858) 534-4813
 After Hours Phone: (858) 822-2124
 Provider Gender: Female
 License number: NP16882
 NPI: 1275598591

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BALL, KELLY R

Provider ID: 125572
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: NP95004819
 NPI: 1902343833

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BAMEL, KASEY C

Provider ID: 126321
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:

After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: NP95004824
 NPI: 1487106886
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BELL, KAREN L

Provider ID: 83215
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6040
 Fax: (858) 822-1669
 After Hours Phone: (858) 822-6040

Provider Gender: Female
 License number: NP349853
 NPI: 1982632758
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BILENKAYA, IRINA

Provider ID: 83241
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8322
 Fax: (858) 657-8269
 After Hours Phone: (858) 657-8322
 Provider Gender: Female
 License number: NP15880
 NPI: 1801030267
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian, Ukrainian
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

BOTTA, LAUREN M Provider ID: 256368 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP95012577 NPI: 1730726563 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP95004366 NPI: 1851749253 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
BOUTELLE, AMY L Provider ID: 243485 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP9500140 NPI: 1609117704	BRADY, KATELYN A Provider ID: 209017 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP95004809 NPI: 1952797540 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	BYRNE, JENNIFER M Provider ID: 113432 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6600 Fax: (958) 822-6395 After Hours Phone: (858) 822-6600 Provider Gender: Female License number: NP23295 NPI: 1568804326 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical
	BUENROSTRO, CHRISTINA Provider ID: 243717	

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D. Directorio de proveedores de atención especializada

Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	LA JOLLA, CA 92093-1350 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP11056 NPI: 1336258276 Provider English Spoken: Yes Provider Language(s) Spoken: Tagalog Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
CAIN, JULIA M Provider ID: 83251 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6100 Fax: (858) 822-6277 After Hours Phone: (858) 822-6100 Provider Gender: Female License number: NP18867 NPI: 1457593808 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	CASTANO, NEREMIAH J Provider ID: 83257 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6100 Fax: (858) 822-6188 After Hours Phone: (858) 822-6100 Provider Gender: Male License number: NP18985 NPI: 1437190071 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None	CHRISTIANSON, ELIZABETH S Provider ID: 247329 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 100 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP95002903 NPI: 1750722666 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, University Of California Irvine Med Ctr, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
CAPOZZI, JENNIFER E Provider ID: 241030 Board Certified Specialty: No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR	CIASCHI, CYNTHIA M Provider ID: 110389 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR	

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D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92093-1503
 Phone: (858) 822-3115
 Fax: (858) 822-1669
 After Hours Phone: (858) 822-3115
 Provider Gender: Female
 License number: NP5263
 NPI: 1750391512
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COLLINS, CYNTHIA M
 Provider ID: 83300
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6303
 Fax: (619) 543-5717
 After Hours Phone: (619) 543-6303
 Provider Gender: Female
 License number: NP17358
 NPI: 1780869164
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CONNOR, CAROLINE L
 Provider ID: 279834
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP13032
 NPI: 1609081710
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CONNOR, CAROLINE L
 Provider ID: 83304
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: NP13032
 NPI: 1609081710
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CRAMER, ARLENE
 Provider ID: 116535
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 534-7079
 Fax: (858) 822-1186
 After Hours Phone: (858) 534-7079
 Provider Gender: Female
 License number: NP14879
 NPI: 1083815575
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CZYPULL, MONICA

Provider ID: 284662
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9850 GENESEE AVE STE 320
 LA JOLLA, CA 92037-1208
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
License number: NP95016815
NPI: 1831784842
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAVIES, SUMMER R

Provider ID: 238922
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7600
Fax:
After Hours Phone: (858) 657-7600

Provider Gender: Female
License number: NP21519
NPI: 1679850671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAVIES, SUMMER R

Provider ID: 253691
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
Phone: (858) 249-6800
Fax: (858) 657-6420
After Hours Phone: (858) 249-6800
Provider Gender: Female
License number: NP21519
NPI: 1679850671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DELA VINA, JANELLE P

Provider ID: 125314
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322
Provider Gender: Female
License number: NP17592
NPI: 1821232778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEUTSCH, ELIANA J

Provider ID: 121229
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NP19666

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1770807000

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DIMAIRA, FRANCESCA

Provider ID: 245579

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95011770

NPI: 1346670718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DIMAIRA, FRANCESCA

Provider ID: 245580

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95011770

NPI: 1346670718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DOVE, JANET H

Provider ID: 83368

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Female

License number: NP8210

NPI: 1982860664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DRCAR, THAO T

Provider ID: 83373

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-5257

Fax: (858) 657-7107

After Hours Phone: (858)

657-5257

Provider Gender: Female

License number: NP14165

NPI: 1710958798

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DRISCOLL, KARRIE

Provider ID: 110193

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6277
Fax: (858) 228-1731
After Hours Phone: (858) 822-6277
Provider Gender: Female
License number: NP22651
NPI: 1396085098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DRISCOLL, KARRIE

Provider ID: 286376
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6277
Fax: (858) 228-1731
After Hours Phone: (858) 822-6277
Provider Gender: Female
License number: NP22651
NPI: 1396085098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DUONG, MICHELLE T

Provider ID: 126862
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6600
Fax:
After Hours Phone: (858) 822-6600
Provider Gender: Female
License number: NP95004623
NPI: 1659821080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELAMPARO, KAYE L , NPA

Provider ID: 258928
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9834 GENESEE AVE # 560
 LA JOLLA, CA 92037-1223

Phone: (858) 552-1710
Fax: (858) 429-4009
After Hours Phone: (858) 552-1710
Provider Gender: Female
License number: NP20795
NPI: 1851673610
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Tagalog
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Mercy Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELMORE, DUDLEY G

Provider ID: 83411
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-7785
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: NP18199
NPI: 1568620375
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ESPEJO, MARISSA C

Provider ID: 121412
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-0320
Fax:
After Hours Phone: (619) 471-0320
Provider Gender: Female
License number: NP20343
NPI: 1508112590
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEELY, HOMIRA

Provider ID: 83426
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax:
After Hours Phone: (858) 822-6040
Provider Gender: Female
License number: NP19711
NPI: 1972839975
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEBEN, CODY J

Provider ID: 244096
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95008175
NPI: 1992179162
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARCIA, DAVID

Provider ID: 83446
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-6222
Fax: (619) 543-7785
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: NP9111
NPI: 1851544480
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARTH, MELISSA A

Provider ID: 268991
Board Certified Specialty: No
 UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95011870
NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARTH, MELISSA A

Provider ID: 268992
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95011870
NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GELUZ, JAYDEE ROSE F

Provider ID: 117074
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 534-7079
Fax:
After Hours Phone: (858) 534-7079
Provider Gender: Female
License number: NP95004002
NPI: 1861854622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GERNHOFER, YAN K

Provider ID: 83661
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1

LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP22280
NPI: 1205185915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Yue Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GERNHOFER, YAN K

Provider ID: 83662
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 437-7777
Fax: (858) 657-5058
After Hours Phone: (619) 437-7777
Provider Gender: Female
License number: NP22280
NPI: 1205185915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Yue Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GILBERT, TARI L

Provider ID: 125238
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
Phone: (858) 249-6800
Fax:
After Hours Phone: (858) 249-6800
Provider Gender: Female
License number: NP10378
NPI: 1811248347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GIOVANNETTI, ERIN R

Provider ID: 276002
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP22803
NPI: 1013317767
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GORDON, CAITLIN R

Provider ID: 246042
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP23078
NPI: 1063842078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GORDON, DEBBIE

Provider ID: 128662
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: NP13438
NPI: 1730315532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HALEY, KATHLEEN M , NPA

Provider ID: 253506
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410

Fax:

After Hours Phone: (858)
552-1410

Provider Gender: Female

License number: NP11124

NPI: 1992869739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/125

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HALEY, KATHLEEN M

Provider ID: 262439

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

9850 GENESEE AVE STE 560

LA JOLLA, CA 92037-1229

Phone: (858) 552-1410

Fax:

After Hours Phone: (858)
552-1410

Provider Gender: Female

License number: NP11124

NPI: 1992869739

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HARKNESS, RUMIKO

Provider ID: 208840

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP11566

NPI: 1487785093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HERMAN, HEATHER G

Provider ID: 83590

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 534-7079

Fax: (858) 822-0872

After Hours Phone: (858)

534-7079

Provider Gender: Female

License number: NP15024

NPI: 1407064728

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HORNFELD, COURTNEY A

Provider ID: 277360

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (619) 543-7128

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95013375

NPI: 1982234027

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HUYNH, HOAI HUONG K

Provider ID: 83606

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8540

Fax: (858) 657-8549

After Hours Phone: (858)

657-8540

Provider Gender: Female

License number: NP19793

NPI: 1194035501

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

IYER, VICTORIA G

Provider ID: 265624

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP18782

NPI: 1871738864

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

JONES, CHRISTA E

Provider ID: 275564

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (800) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95914220

NPI: 1396371431

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KHUAT, LIEN M

Provider ID: 83653

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6380

Fax: (858) 657-6904

After Hours Phone: (858)

657-6380

Provider Gender: Female

License number: NP13634

NPI: 1366558678

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KIM, JENNIFER S

Provider ID: 112495

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 534-7079

Fax: (858) 822-6186

After Hours Phone: (858)

534-7079

Provider Gender: Female

License number: NP19867

NPI: 1851601819

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIRK, MARY P

Provider ID: 83657
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-0701
Fax: (619) 543-7785
After Hours Phone: (619) 471-0701
Provider Gender: Female
License number: NP17276
NPI: 1760668073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLEIN, SUSAN H

Provider ID: 262457

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (760) 432-3340
Fax:
After Hours Phone: (760) 432-3340
Provider Gender: Female
License number: NP23266
NPI: 1831522010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

KNECHEL, NANCY A

Provider ID: 83660
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: NP17401
NPI: 1871757211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOMIYA, ASAKO

Provider ID: 279183
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 4150 REGENTS PARK ROW
 STE 355
 LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Provider Gender: Female
License number: NP13504
NPI: 1144797895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KORMANIK, PATRICIA A

Provider ID: 282070

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP9707
NPI: 1093895047
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KORMANIK, PATRICIA A

Provider ID: 83665
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6395
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: NP9707
NPI: 1093895047
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEBLANC, ALLYN E

Provider ID: 275539
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95004227
NPI: 1376732685
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEE, HEE J

Provider ID: 274644
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95006499
NPI: 1497275705
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEITHEM, DESIREE S

Provider ID: 121150
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NP18324
NPI: 1952564320
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIEBMAN, RACHAEL R

Provider ID: 280390
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP95007834
NPI: 1396130050
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LITTRELL, MICHELE

Provider ID: 83709
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-8235
Fax: (858) 534-0064
After Hours Phone: (858)
 534-8235
Provider Gender: Female
License number: NP13577
NPI: 1740471978
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARTINEZ, JOYCELLE C

Provider ID: 84008
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL
 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-8530
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP16021
NPI: 1891906228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MATTHESS, JANETTE E

Provider ID: 122010
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
 657-8745
Provider Gender: Female
License number: NP22833
NPI: 1457694549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MATTHESS, JANETTE E

Provider ID: 287644
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP22833
 NPI: 1457694549
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MATTHESS, JANETTE E
 Provider ID: 287645
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP22833
 NPI: 1457694549
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MCALPIN, REBECCA A
 Provider ID: 84012
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6040
 Fax: (858) 822-1634
 After Hours Phone: (858) 822-6040
 Provider Gender: Female
 License number: NP17151
 NPI: 1063662153
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MCGHEE, SARAH L
 Provider ID: 113363
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-5182
 Fax: (858) 822-6186
 After Hours Phone: (858) 822-5182
 Provider Gender: Female
 License number: NP18236
 NPI: 1043467020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEDIANO, FERNANDO
 Provider ID: 116093
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8540
 Fax:
 After Hours Phone: (858) 657-8540
 Provider Gender: Male
 License number: NP95005764
 NPI: 1730558743
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MICK, SHARON L

Provider ID: 84133

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8590

Fax:

After Hours Phone: (858)

657-8590

Provider Gender: Female

License number: NP10449

NPI: 1891061966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MIRALLES, ARA

Provider ID: 84273

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Female

License number: NP22052

NPI: 1457697567

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP19120

NPI: 1952627176

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NACOSTE, LAKEISHA

Provider ID: 272935

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-5210

Fax:

After Hours Phone: (858)

822-5210

Provider Gender: Female

License number: NP95007600

NPI: 1194139634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NINCHAK, VIOLA M

Provider ID: 285896

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE 530

LA JOLLA, CA 92037-1213

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)

631-3000

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: NP95010549
NPI: 1275007403
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ODONNELL, SIOBHAN M

Provider ID: 110904
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 822-6600
Fax:
After Hours Phone: (858) 822-6600
Provider Gender: Female
License number: NP21367
NPI: 1760745947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
PAULSON, KERRY L
Provider ID: 201269
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (619) 543-3000
Fax:
After Hours Phone: (619) 543-3000
Provider Gender: Female
License number: NP95002615
NPI: 1518363407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHILBRICK, MEGAN M

Provider ID: 270401
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95012381

NPI: 1871074633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHILLIPS, KELLY M

Provider ID: 84328
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858) 657-8322
Provider Gender: Female
License number: NP18868
NPI: 1336370543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

PODSADA, KIMBERLY C

Provider ID: 121756

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 822-6135

Fax: (858) 657-6644

After Hours Phone: (858)

822-6135

Provider Gender: Female

License number: NP19181

NPI: 1891011078

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RALEIGH, DEBORAH J

Provider ID: 215016

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP21444

NPI: 1689006876

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University Of

California Irvine Med Ctr, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RICHARDS, LISA M

Provider ID: 84583

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax: (619) 471-3242

After Hours Phone: (858)

657-8322

Provider Gender: Female

License number: NP8458

NPI: 1720247612

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RIVIELLO, GABRIELA

Provider ID: 84588

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-7162

Fax: (619) 543-6954

After Hours Phone: (619)

543-7162

Provider Gender: Female

License number: NP13576

NPI: 1871758508

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ROCHE, CHELSEA E

Provider ID: 270706

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95012534

NPI: 1063040384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SERRATO, ANTHONY J

Provider ID: 278974

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: NP95016430

NPI: 1376138388

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SMITH, HEIDI A

Provider ID: 84816

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax: (619) 543-7785

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: NP8236

NPI: 1992950539

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SOLDANO, DEBBIE A

Provider ID: 123422

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Female

License number: NP95001088

NPI: 1174923072

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SRILASAK, MICHELE

Provider ID: 281855

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP13694

NPI: 1265487326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SRILASAK, MICHELE

Provider ID: 84899

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6040
Fax:
After Hours Phone: (858)
822-6040
Provider Gender: Female
License number: NP13694
NPI: 1265487326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEVENSON, REHEIA A

Provider ID: 210795
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95003341
NPI: 1346696044
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUN, CHENG

Provider ID: 84911
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: NP9759
NPI: 1437358892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TANGTUMNU, RUNGFA

Provider ID: 84923
Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6502
Fax: (619) 543-7785
After Hours Phone: (619)
543-6502
Provider Gender: Female
License number: NP17451
NPI: 1689828741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TOMICICH, STEPHANIE S

Provider ID: 115348
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
9834 GENESEE AVE STE 416
LA JOLLA, CA 92037-1264
Phone: (858) 458-0099
Fax:
After Hours Phone: (858)
458-0099
Provider Gender: Female
License number: NP95002402
NPI: 1316333792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 16/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

*IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd*

TOMICICH, STEPHANIE S , NPA

Provider ID: 248026

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9834 GENESEE AVE STE 416

LA JOLLA, CA 92037-1264

Phone: (858) 458-0099

Fax:

After Hours Phone: (858)

458-0099

Provider Gender: Female

License number: NP95002402

NPI: 1316333792

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/125

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

*IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd*

TOMICICH, STEPHANIE S

Provider ID: 262398

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

9850 GENESEE AVE STE 560

LA JOLLA, CA 92037-1229

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559)

447-4949

Provider Gender: Female

License number: NP95002402

NPI: 1316333792

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

*IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd*

TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL

1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95010163

NPI: 1326563495

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP95010163

NPI: 1326563495

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

TRUJILLO, DALE M

Provider ID: 278428
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95009664
NPI: 1003104423
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRUJILLO, DALE M

Provider ID: 278428
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PT18136
NPI: 1003104423

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VERA, ABIGAIL M

Provider ID: 119436
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7073
Fax:
After Hours Phone: (858) 657-7073
Provider Gender: Female
License number: NP23547
NPI: 1932462785
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

WATERS, VALERIE L

Provider ID: 121214
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NP95007374
NPI: 1770002313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WAX, VIVIKA S

Provider ID: 84957
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax: (858) 657-5054
After Hours Phone: (858) 657-8530
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: NP12765
NPI: 1497881197
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WHEELER, LAURA G

Provider ID: 262453
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4150 REGENTS PARK ROW STE 355
LA JOLLA, CA 92037-9102
Phone: (858) 457-2043
Fax: (858) 457-2092
After Hours Phone: (858) 457-2043
Provider Gender: Female
License number: NP13812
NPI: 1306857255
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network
YOAKUM, STEPHANIE H
Provider ID: 125317
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: NP12624
NPI: 1386609386
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED REGISTERED NURSE MIDWIFE

BECERRA, AMANDA J
Provider ID: 110463
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701

Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NM235778
NPI: 1386037299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COOPER, ANNE S

Provider ID: 83305
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax: (858) 657-8666
After Hours Phone: (858) 657-8745
Provider Gender: Female
License number: NM1689
NPI: 1477644417
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Phone: (858) 657-8745 Fax: (858) 657-8666 After Hours Phone: (858) 657-8745 Provider Gender: Female License number: NMW862 NPI: 1659344224 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
DOLLAND, STEVEN C Provider ID: 280553 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: NA95000632 NPI: 1982059044 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Kern Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	GOODWIN, RACHEL K Provider ID: 126235 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NM1908 NPI: 1518274919 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	GOODWIN, RACHEL K Provider ID: 210017 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NM1908 NPI: 1518274919 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
GARRETT BROWN, REBECCA C Provider ID: 83459 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300	GOODWIN, RACHEL K Provider ID: 126235 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NM1908 NPI: 1518274919 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None	GREAR MANN, MELISSA P Provider ID: 210051 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NMW1830
 NPI: 1255384475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GUNTHER, HOPE R

Provider ID: 210040
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: NM1421
 NPI: 1285667741
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 210056
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 210057
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745

Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 83597
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax: (619) 543-6792
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210135
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210136
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NM1061
NPI: 1518916857

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 84325
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax: (619) 543-2366
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WARD, PAMELA R

Provider ID: 84953
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax: (858) 657-8666
After Hours Phone: (858)
657-8745
Provider Gender: Female
License number: NM757
NPI: 1912063199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DERMATOLOGY

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269668
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
657-8322
Provider Gender: Male
License number: A134188
NPI: 1962836783

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Paradise
 Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GALLO, RICHARD L

Provider ID: 65173
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax: (858) 657-8723
After Hours Phone: (858)
 657-8322
Provider Gender: Male
License number: C50273
NPI: 1679598890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HATA, TISSA R

Provider ID: 65186
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
 657-8322
Provider Gender: Female
License number: G63547
NPI: 1558313916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MIREMADI, ARJAMG K

Provider ID: 122520
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 7702 IVANHOE AVE
 LA JOLLA, CA 92037-4520
Phone: (858) 456-1840
Fax: (858) 456-9341
After Hours Phone: (858)
 456-1840
Provider Gender: Male
License number: A31016
NPI: 1497849418
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

MIREMADI, ARJAMG K

Provider ID: 257630
Board Certified Specialty: Yes
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 7702 IVANHOE AVE
 LA JOLLA, CA 92037-4520
Phone: (858) 456-1840
Fax: (858) 456-9341
After Hours Phone: (858)
 456-1840
Provider Gender: Male
License number: A31016
NPI: 1497849418
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc

YU, BENJAMIN D

Provider ID: 65328
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
657-8322
Provider Gender: Male
License number: A80119
NPI: 1831103084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EMERGENCY MEDICINE

AMANN, CHRISTOPHER J

Provider ID: 270914
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (888) 539-8781
After Hours Phone: (858)
657-7000

Provider Gender: Male
License number: C132360
NPI: 1134326895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271131
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY

Provider ID: 270335
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, JINGHONG

Provider ID: 255937
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858) 657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, JINGHONG

Provider ID: 255938
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858) 657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PADDOCK, DIANA L

Provider ID: 256121
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA52175
NPI: 1447657804
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ENDOCRINOLOGY METABOLISM DIABETES

BOEDER, SCHAFFER C

Provider ID: 255612
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A129134
NPI: 1477808285
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DILLMANN, WOLFGANG

Provider ID: 65162
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: A33658
NPI: 1386675445
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DULEBA, ANTONI J

Provider ID: 83386
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 543-2347
Fax:
After Hours Phone: (858) 543-2347
Provider Gender: Male
License number: C52680
NPI: 1659354702
Provider English Spoken: Yes
Provider Language(s) Spoken: Polish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EDELMAN, STEVEN V

Provider ID: 83396
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-1636
Fax:
After Hours Phone: (858) 657-1636
Provider Gender: Male
License number: G51578
NPI: 1477585248
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUERIN, CHRIS K

Provider ID: 284645
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G47081
NPI: 1275648875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr,

Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAMIDI, VALA

Provider ID: 121429
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A150069
NPI: 1316231681
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JUANG, PATRICIA S

Provider ID: 255606

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JUANG, PATRICIA S
Provider ID: 83552
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KULASA, KRISTEN M
Provider ID: 255623
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 962-8273
Fax: (888) 539-8781
After Hours Phone: (800) 962-8273
Provider Gender: Female
License number: A96293
NPI: 1932324175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MAFONG, DEREK D
Provider ID: 65242
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # C
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8440
Fax: (858) 657-8989
After Hours Phone: (858) 657-8440
Provider Gender: Male
License number: A89536
NPI: 1699781633
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAGELBERG, JODI B
Provider ID: 287778
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR
 LA JOLLA, CA 92037-1732
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A146838

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

NPI: 1720474141

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A108282

NPI: 1518163799

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WOODS, GINA N

Provider ID: 110869

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1A

LA JOLLA, CA 92037-1300

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Female

License number: A81848

NPI: 1467401521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EASTMAN, AMELIA S

Provider ID: 83393

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Female

License number: 20A11643

NPI: 1336393990

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Ucsd Medical Ctr, Ucsd

La Jolla John Sally Thornton,

Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

FAMILY PRACTICE

CHEN, ALICE I

Provider ID: 207165

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A16077

NPI: 1265810337

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email: Medical Group(s): IPA:	Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A63540 NPI: 1750339446 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
FEMALE PELVIC MED AND RECONSTRUCTIVE SURG		
LUKACZ, EMILY S Provider ID: 256953 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-8745 Fax: After Hours Phone: (858) 657-8745 Provider Gender: Female License number: A63540 NPI: 1750339446 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	ANAND, GOBIND S Provider ID: 272836 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-2347 Fax: (858) 657-7259 After Hours Phone: (619) 543-2347 Provider Gender: Male License number: A120739 NPI: 1861626814 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	
GASTROENTEROLOGY		
LUKACZ, EMILY S Provider ID: 256954 Board Certified Specialty: No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350	ANAND, GOBIND S Provider ID: 110471 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-1636 Fax: After Hours Phone: (858) 657-1636 Provider Gender: Male License number: A120739 NPI: 1861626814 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No	BORTNIKER, ETHAN I Provider ID: 209550 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A155188
 NPI: 1396905576
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRENNER, DAVID A

Provider ID: 64823
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8381
 Fax: (858) 657-8989
 After Hours Phone: (858) 657-8381
 Provider Gender: Male
 License number: G54658
 NPI: 1679649024
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COPUR DAHI, NEDRET

Provider ID: 64853
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619) 543-2347
 Provider Gender: Female
 License number: A99701
 NPI: 1932290145
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Turkish

Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DAVE, SHRAVAN S

Provider ID: 270448
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 925-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 925-8273
 Provider Gender: Male
 License number: A139385
 NPI: 1588081814
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DAVE, SHRAVAN S

Provider ID: 270449
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A139385
 NPI: 1588081814
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DILAURO, STEVEN C , MD

Provider ID: 269298
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 440
 LA JOLLA, CA 92037-1212
Phone: (858) 373-0211
Fax: (760) 635-5972
After Hours Phone: (858)
 373-0211
Provider Gender: Male
License number: A104332
NPI: 1629117643
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOCHERTY, MICHAEL J

Provider ID: 64859
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300

Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
 543-2347
Provider Gender: Male
License number: A74870
NPI: 1841230935
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
 Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEHMI, SYED M

Provider ID: 64876
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
 543-2347
Provider Gender: Male
License number: A107838
NPI: 1942320288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEJLEH, MOHAMMAD P

Provider ID: 271042
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A149205
NPI: 1205240959
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

☎ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FEJLEH, MOHAMMAD P

Provider ID: 271043
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A149205
 NPI: 1205240959
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email:
 Medical Group(s): IPA: Ucsd Medical Group

GOLDKLANG, ROBERT H , MD
 Provider ID: 269271
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 440
 LA JOLLA, CA 92037-1212
 Phone: (858) 373-0211
 Fax: (760) 635-5972
 After Hours Phone: (858) 373-0211
 Provider Gender: Male
 License number: G69237
 NPI: 1275527657
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email:
 Medical Group(s): IPA: Community Care Ipa Llc
GUPTA, SAMIR
 Provider ID: 83525
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax: (619) 543-7480
 After Hours Phone: (619) 543-2347
 Provider Gender: Male
 License number: A78715
 NPI: 1023127057

Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website: Email:
 Medical Group(s): IPA:

HEMPERLY, AMY V
 Provider ID: 239551
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: 20A14741
 NPI: 1881960888
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email:
 Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group

HOLMER, ARIELA K
 Provider ID: 273216
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A149594
 NPI: 1083032544
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KALMAZ, DENISE

Provider ID: 64931
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619)
 543-2347
 Provider Gender: Female
 License number: A87252
 NPI: 1275700973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KLAPHEKE, ROBERT W

Provider ID: 283347
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A154916
 NPI: 1891113288
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KLAPHEKE, ROBERT W

Provider ID: 283348
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A154916
 NPI: 1891113288
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KONO, YUKO

Provider ID: 65218
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8010
 Fax:
 After Hours Phone: (858)
 657-8010
 Provider Gender: Female
 License number: A111039
 NPI: 1982628665
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KRINSKY, MARY L

Provider ID: 83674
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: 20A7425
NPI: 1588765085

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KWONG, WILSON T

Provider ID: 84283
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: A114763
NPI: 1134389653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LAJOIE, ADRIANNE M , MD

Provider ID: 269300
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 373-0211
Fax: (760) 635-5972
After Hours Phone: (858)
373-0211
Provider Gender: Female
License number: A84301
NPI: 1225253651
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MENDLER, MICHEL H

Provider ID: 210290
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Keck Hospital
Of Usc, Ucsd Medical Ctr, Usc
Kenneth Norris Jr Cancer
Hospital, Lac Usc Medical
Center, Lac Rancho Los Amigos
National Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MENDLER, MICHEL H

Provider ID: 65247
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Lac USC Medical Center, Lac Rancho Los Amigos National Rehab Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MITTAL, RAVINDER K

Provider ID: 65255

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: C50204

NPI: 1376567255

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

NGUYEN, NGHIA H

Provider ID: 283295

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A144052

NPI: 1154718997

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NGUYEN, NGHIA H

Provider ID: 283296

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7423

Fax: (888) 539-8781

After Hours Phone: (858)

657-7423

Provider Gender: Male

License number: A144052

NPI: 1154718997

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PATEL, DEREK R

Provider ID: 65008

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR # 2C

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: A69111

NPI: 1073538385

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PATTON, HEATHER M

Provider ID: 65274

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A75284
NPI: 1396796124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIVERA NIEVES, JESUS

Provider ID: 65030
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: C54808
NPI: 1437228079
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIVERA NIEVES, JESUS

Provider ID: 65287
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: C54808
NPI: 1437228079
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANDBORN, WILLIAM J

Provider ID: 65293

Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G63853
NPI: 1639157563
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAVIDES, THOMAS J

Provider ID: 65048
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G64139
NPI: 1588649081
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAH, SHAILJA C

Provider ID: 283897
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A125800
NPI: 1073803243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAH, SHAILJA C

Provider ID: 283898
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A125800
NPI: 1073803243
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSAI, MATTHEW

Provider ID: 252368
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A138084
NPI: 1285051177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSAI, MATTHEW

Provider ID: 252369
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A138084
NPI: 1285051177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSE, CHUNG S

Provider ID: 282879
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171036
NPI: 1417336215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TSE, CHUNG S

Provider ID: 282880
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171036
NPI: 1417336215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, EDWARD

Provider ID: 283163
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154057
NPI: 1437545654
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YANG, EDWARD

Provider ID: 283164
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154057
NPI: 1437545654
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GENETICS MEDICAL

JONES, MARILYN C

Provider ID: 202347
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 280121
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: G30850
NPI: 1295806040
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

SCIOSCIA, ANGELA L

Provider ID: 65298
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: G64765
NPI: 1902839335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N

Provider ID: 282165
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A102482

NPI: 1144486929
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Earl
And Lorraine Miller Childrens
Hsp, Long Beach Memorial Med
Ctr, Providence St Joseph
Hospital, Providence St Jude
Medical Center, Orange Coast
Mem Med Ctr, Fountain Valley
Regional Hosp And Med Ctr,
Corona Regional Med Ctr, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEMATOLOGY / ONCOLOGY

ASIMAKOPOULOS, FOTIOS A

Provider ID: 246594
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A115772
NPI: 1518134923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BALL, EDWARD D

Provider ID: 64405
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
 822-6100
Provider Gender: Male
License number: G84752
NPI: 1093740110
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BANERJEE, PUSHPENDU, MD

Provider ID: 257619

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
 552-1410
Provider Gender: Male
License number: A69490
NPI: 1164497855
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

BANERJEE, PUSHPENDU

Provider ID: 54041
Board Certified Specialty: No
 CALIFORNIA CANCER
 ASSOCS FOR RESEARCH AND
 EXCELL
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax:
After Hours Phone: (858)
 552-1410
Provider Gender: Male

License number: A69490
NPI: 1164497855
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

BAZHENOVA, LYUDMILA A

Provider ID: 64408
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
 822-6100
Provider Gender: Female
License number: A76755
NPI: 1093791006
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A140495 NPI: 1881006955 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
BEJAR, RAFAEL Provider ID: 64409 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6100 Fax: After Hours Phone: (858) 822-6100 Provider Gender: Male License number: A121394 NPI: 1720051493 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	CHOI, MICHAEL Y Provider ID: 64417 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6100 Fax: (858) 534-5620 After Hours Phone: (858) 822-6100 Provider Gender: Male License number: A100104 NPI: 1912181173 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None	COHEN, EZRA Provider ID: 112498 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 534-3804 Fax: After Hours Phone: (858) 534-3804 Provider Gender: Male License number: C132549 NPI: 1518029065 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☯ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
BOTTA, GREGORY P Provider ID: 242346 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503		DANIELS, GREGORY A Provider ID: 64422 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 822-6100 Fax: After Hours Phone: (858) 822-6100 Provider Gender: Male License number: A92515 NPI: 1164480943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-5182 Fax: (858) 534-6186 After Hours Phone: (858) 822-5182 Provider Gender: Female License number: C139391 NPI: 1306909791 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
FANTA, PAUL T Provider ID: 64428 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6135 Fax: (858) 822-6186 After Hours Phone: (858) 822-6135 Provider Gender: Male License number: A81637 NPI: 1467661496 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):	FLORES, EDNA I, MD Provider ID: 256366 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9850 GENESEE AVE STE 830 LA JOLLA, CA 92037-1219 Phone: (858) 552-1410 Fax: (858) 429-4009 After Hours Phone: (858) 552-1410 Provider Gender: Female License number: A114373 NPI: 1396994604 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	GOODMAN, AARON M Provider ID: 121426 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6173 Fax: After Hours Phone: (858) 822-6173 Provider Gender: Male License number: A130400 NPI: 1851603559 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):
	GOLD, KATHRYN A Provider ID: 109559 Board Certified Specialty: No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GOODMAN, AARON M

Provider ID: 216894
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6200
 Fax:
 After Hours Phone: (858)
 822-6200
 Provider Gender: Male
 License number: A130400
 NPI: 1851603559
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GOPAL, SRILA

Provider ID: 127731
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-6276
 Fax:
 After Hours Phone: (858)
 822-6276
 Provider Gender: Female
 License number: A151332
 NPI: 1831323369
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HAMDAN, AYAD

Provider ID: 241429
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3800-3899 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: C162882
 NPI: 1144431230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, French
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 128684
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A157684
 NPI: 1982995809
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No

☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M

Provider ID: 128685
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M
Provider ID: 128686
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M
Provider ID: 202662
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M
Provider ID: 202664
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

HEYMAN, BENJAMIN M
Provider ID: 202663
Board Certified Specialty: No

UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEYMAN, BENJAMIN M
Provider ID: 202664
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A157684
NPI: 1982995809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

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D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JAMIESON, CATRIONA H

Provider ID: 64436
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6276
Fax:
After Hours Phone: (858)
 822-6276
Provider Gender: Female
License number: A67419
NPI: 1841223617
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KATO, SHU M

Provider ID: 113897
Board Certified Specialty: No

UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-3115
Fax:
After Hours Phone: (858)
 822-3115
Provider Gender: Male
License number: A111322
NPI: 1609025865
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOURA, DIVYA T

Provider ID: 83672
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6844
After Hours Phone: (858)
 822-6100
Provider Gender: Female
License number: A125774
NPI: 1053471318
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KU, GRACE H

Provider ID: 64444
Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
 822-6100
Provider Gender: Female
License number: A92382
NPI: 1538145719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Uc Davis Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLARD, FREDERICK E

Provider ID: 64454

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G52424
NPI: 1922056373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLARD, FREDERICK E

Provider ID: 64454
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G52424
NPI: 1922056373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLER, AARON M

Provider ID: 112346
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-3115
Fax: (858) 822-6186
After Hours Phone: (858) 822-3115
Provider Gender: Male
License number: A118116
NPI: 1104127679
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MITCHELL, WILLIAM M

Provider ID: 64455
Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6352
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: A92024
NPI: 1669634663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARK, SOO J

Provider ID: 257202
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A135455
NPI: 1821351198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PATEL, SANDIP P

Provider ID: 88443

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax: (858) 246-1915

After Hours Phone: (858)

822-6100

Provider Gender: Male

License number: A110132

NPI: 1245481381

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Eisenhower Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PEARSE, WILLIAM B

Provider ID: 285649

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A173950

NPI: 1225423148

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RANDALL, JAMES M

Provider ID: 64466

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax: (858) 822-6186

After Hours Phone: (858)

822-6100

Provider Gender: Male

License number: A99468

NPI: 1144407115

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RICHARDSON, ANGELIQUE E

Provider ID: 215010

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A123556

NPI: 1700120102

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SACCO, ASSUNTINA G

Provider ID: 110199

Board Certified Specialty: No

UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6198
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A132120
NPI: 1871757831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWAB, RICHARD B

Provider ID: 64476
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6200
Fax:
After Hours Phone: (858) 822-6200
Provider Gender: Male
License number: A76913
NPI: 1710900345
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SINCLAIR, JAMES M

Provider ID: 54027
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: G48926
NPI: 1356300230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

STEWART, TYLER F

Provider ID: 243920
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A163409
NPI: 1699110676
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TANAKA, TIFFANY N

Provider ID: 115252
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6276
Fax:
After Hours Phone: (858) 822-6276
Provider Gender: Female
License number: A119740
NPI: 1407159726
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TZACHANIS, DIMITRIOS

Provider ID: 102364
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6600
Fax:
After Hours Phone: (858) 822-6600
Provider Gender: Male
License number: C55514
NPI: 1528026002
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Greek
Cultural Competency: No
Hospital Affiliation: Cedars Sinai Medical Center, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VU, PETER

Provider ID: 272717
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A149741
NPI: 1861810830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WALLACH, SABINA R , MD

Provider ID: 269286
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 400
 LA JOLLA, CA 92037-1212
Phone: (858) 558-8666
Fax: (858) 558-9233
After Hours Phone: (858) 558-8666
Provider Gender: Female
License number: A34070
NPI: 1871529081
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEPATOLOGY

BARMAN, PRANAB M

Provider ID: 241952
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # 2C
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A162554
NPI: 1023301991
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

BARMAN, PRANAB M

Provider ID: 241954
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A162554
NPI: 1023301991
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHARPTON, SUZANNE

Provider ID: 245667
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-5273
Fax:
After Hours Phone: (800)
926-5273
Provider Gender: Female

License number: A123642
NPI: 1891084257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOSPICE AND PALLIATIVE MEDICINE

MESARWI, PAULA

Provider ID: 118780
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Male
License number: C144047
NPI: 1073722021
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

RUBENSIK, TAMARA T

Provider ID: 245574
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA J

Provider ID: 275069
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A86157
 NPI: 1033128376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CHILDERS, DIANA J

Provider ID: 275070
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A86157
 NPI: 1033128376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

FIRESTEIN, CATHERINE E

Provider ID: 275388
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A143013
 NPI: 1427348382
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HAMMOND, CHARLES F

Provider ID: 278589
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A169655
 NPI: 1033641816
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SHINDO, YURI

Provider ID: 284744
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A167796
 NPI: 1700271939
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Provider ID: 117215
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6146
 Fax:
 After Hours Phone: (619) 543-6146
 Provider Gender: Female
 License number: A131119
 NPI: 1639494420

Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

INFECTIOUS DISEASE

BENSON, CONSTANCE A

Provider ID: 64814
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: G87372
 NPI: 1871541664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LOONEY, DAVID J

Provider ID: 64959
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: G67588
 NPI: 1912955048
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

RAWLINGS, STEPHEN A

Provider ID: 284362
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9500 GILMAN DR # 2069
 LA JOLLA, CA 92093-5004
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A146123
 NPI: 1861888984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SAVOIA, MARIA C

Provider ID: 65049

COWELL, ANNE N

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6146

Fax:

After Hours Phone: (619)
543-6146

Provider Gender: Female

License number: G36729

NPI: 1710903075

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Arabic

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284703

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800)

926-5273

Provider Gender: Female

License number: A47911

NPI: 1750317251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hebrew

Cultural Competency: No

Hospital Affiliation: Ronald

Reagan Ucla Med Ctr, Lac Usc

Medical Center, Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271468

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A133179

NPI: 1992141428

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ROSE, ALEXANDRA

Provider ID: 224832

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ALOTAIBI, MONA A

Provider ID: 271480

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A147271

NPI: 1174933915

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

License number: A143518
 NPI: 1033557525
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TRAN, LINH N

Provider ID: 271938
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A122603
 NPI: 1851682728
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Southwest
 Healthcare System Murrieta
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

INTERNAL MEDICINE GERIATRIC MEDICINE

BOULAND, DANIEL L

Provider ID: 64820
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9198
 Fax: (619) 543-8255
 After Hours Phone: (619)
 471-9198
 Provider Gender: Male
 License number: G50358
 NPI: 1669498630
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Riverside
 Community Hosp, Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

INTERNAL MEDICINE

ABDELMALEK, JOSEPH A

Provider ID: 83072
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858)
 657-7000
 Provider Gender: Male
 License number: A107185
 NPI: 1740485531
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ABDELMALEK, JOSEPH A

Provider ID: 83075
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE
 110
 LA JOLLA, CA 92037-1732
 Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858)
 657-8000
 Provider Gender: Male
 License number: A107185
 NPI: 1740485531
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ALLY, MARYANN T

Provider ID: 117754
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619) 471-9186
 Provider Gender: Female
 License number: C146011
 NPI: 1316104359
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

AMIRREZVANI, ALI

Provider ID: 64798
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G88284
 NPI: 1861485005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANG, LAWRENCE W

Provider ID: 111110
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A115926
 NPI: 1851529879
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: University Hsp Of San Diego Co

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANG, LAWRENCE W

Provider ID: 116100
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (858) 657-8530
 Fax:
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 License number: A115926
 NPI: 1851529879
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: University Hsp Of San Diego Co
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANTONUCCI, STEPHEN A

Provider ID: 115618
 Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9185
Fax:
After Hours Phone: (619) 471-9185
Provider Gender: Male
License number: A143234
NPI: 1124331426
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARUTYUNOV, BORIS S
Provider ID: 201909
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A137892
NPI: 1144562703
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No

Hospital Affiliation: Sutter Medical Center Sacramento, Good Samaritan Hospital, Good Samaritan Hospital Los Angeles, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ASUDANI, DEEPAK G
Provider ID: 64802
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A100515
NPI: 1548208812
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAJWA, JASWINDER P
Provider ID: 64807
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A118049
NPI: 1306000922
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAZICK, JESSICA G
Provider ID: 64811
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A121356
NPI: 1114155082

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELL, JOHN F

Provider ID: 64813
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A120667
NPI: 1699978445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
BLUESTEIN, HARRY G
Provider ID: 65129
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 657-8010
Fax:
After Hours Phone: (858) 657-8010
Provider Gender: Male
License number: G20053
NPI: 1295793024

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOLAND, BRIGID S

Provider ID: 83242
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A111250
NPI: 1902069446
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORDIN-WOSK, TALYA S

Provider ID: 273984
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
License number: A123772
NPI: 1801184973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BORDIN-WOSK, TALYA S

Provider ID: 273985
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A123772
NPI: 1801184973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROWNE, SARA H

Provider ID: 64829
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A51877
NPI: 1275571176
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHACE, CONSTANCE R

Provider ID: 117242
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: A129086
NPI: 1154682953
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHENG, GEORGE Z

Provider ID: 247640
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A166013
NPI: 1316174568
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOE, CHARLES H

Provider ID: 64732
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A77451

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1891733846
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHOE, CHARLES H
 Provider ID: 65146
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8440
 Fax:
 After Hours Phone: (858) 657-8440
 Provider Gender: Male
 License number: A77451
 NPI: 1891733846
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA:
CHOUETRI, MICHEL B
 Provider ID: 118666
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9186
 Fax: (619) 543-8255
 After Hours Phone: (619) 471-9186
 Provider Gender: Male
 License number: A117112
 NPI: 1780991869
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CLAY, BRIAN J
 Provider ID: 64850
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male

License number: A83799
 NPI: 1831124635
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COSTELLO, CAITLIN L
 Provider ID: 64419
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Female
 License number: A108322
 NPI: 1760649230
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A15063

NPI: 1417343732

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EL KAREH, ROBERT E

Provider ID: 64868

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 471-9185

Fax: (619) 543-8255

After Hours Phone: (619)

471-9185

Provider Gender: Male

License number: A112957

NPI: 1497944656

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FREDERICK, WILLIAM J

Provider ID: 83442

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 471-9186

Fax: (619) 543-8255

After Hours Phone: (858)

471-9186

Provider Gender: Male

License number: A123614

NPI: 1841592805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GALANINA, NATALIE

Provider ID: 112342

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Female

License number: A121363

NPI: 1235372855

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Medical Ctr At Ucsf

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GANDHI, NIKHIL R

Provider ID: 64881

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

License number: A81799
NPI: 1609934538
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Vibra Hospital Of San Diego, Ucsd Medical Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GELBERG, ANNA

Provider ID: 285639
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A105308
NPI: 1104004258
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Hoag Memorial Hospital Presbyterian, Ucsd Medical Ctr,

Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANNA, LINDSAY D

Provider ID: 284967
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95009601
NPI: 1699257907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HELSTEN, TERESA L

Provider ID: 64431
Board Certified Specialty: No
 UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: A71996
NPI: 1265408678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOGARTH, MICHAEL A

Provider ID: 214385
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A51060
NPI: 1225019193
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Uc Davis Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HORMAN, SARAH F

Provider ID: 64913
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: A110036
NPI: 1861657744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSU, JONATHAN C

Provider ID: 83549
Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A104474
NPI: 1629199195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HSU, JONATHAN C

Provider ID: 83602
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (858) 657-8814
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A104474
NPI: 1629199195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUANG, BRYAN J

Provider ID: 64917
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619) 471-9198
Provider Gender: Male
License number: A87875
NPI: 1881652394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUSAIN, HATIM

Provider ID: 83605
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Male
License number: A99267
NPI: 1629234109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IVANOV, MARGARET A

Provider ID: 272876
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A156352
NPI: 1326427014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JABBOUR, MOUSSA

Provider ID: 256658
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A148314
NPI: 1255741633
Provider English Spoken: Yes
Provider Language(s) Spoken:

Arabic

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JENKINS, IAN H

Provider ID: 64927

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619)
471-9198
Provider Gender: Male
License number: A87009
NPI: 1992762520
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAFI, AARYA

Provider ID: 271607
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A123008
NPI: 1255612339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Center, Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KAHN, ANDREW M

Provider ID: 64929

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: A78646

NPI: 1841247384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAHN, ANDREW M

Provider ID: 65205

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 1D

LA JOLLA, CA 92037-1300

Phone: (858) 657-8530

Fax:

After Hours Phone: (858)

657-8530

Provider Gender: Male

License number: A78646

NPI: 1841247384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KALUNIAN, KENNETH C

Provider ID: 65206

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 249-2500

Fax:

After Hours Phone: (858)

249-2500

Provider Gender: Male

License number: G43645

NPI: 1346269990

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A158910

NPI: 1730507872

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KIPPS, THOMAS J

Provider ID: 64443

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G43229
NPI: 1306861950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOOLA, JEJO D

Provider ID: 113846
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A122014
NPI: 1073775532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KVIATKOVSKY, MILLA J

Provider ID: 118158
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KVIATKOVSKY, MILLA J

Provider ID: 274002
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KVIATKOVSKY, MILLA J

Provider ID: 274004
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KWAK, KEVIN W

Provider ID: 118238
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A149375
NPI: 1033538632
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
LAGO HERNANDEZ, CARLOS A
Provider ID: 238623
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A146029
NPI: 1558756270
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAGO HERNANDEZ, CARLOS A
Provider ID: 238624
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A146029
NPI: 1558756270
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAM, MICHAEL T

Provider ID: 274409
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A141055
NPI: 1578974259
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LIPPMAN, SCOTT M

Provider ID: 64446

Board Certified Specialty: No

UC SAN DIEGO CANCER CTR

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax:

After Hours Phone: (858)

822-6100

Provider Gender: Male

License number: A37790

NPI: 1780780874

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LOOMBA, ROHIT

Provider ID: 65238

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Provider Gender: Male

License number: A98657

NPI: 1578593521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MAJITHIA, AMIT R

Provider ID: 255881

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C158025

NPI: 1801091459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MARC AURELE, KRISHELLE L

Provider ID: 118768

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 249-5800

Fax:

After Hours Phone: (858)

249-5800

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARC AURELE, KRISHELLE L

Provider ID: 118770

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNMTN
 9888 GENESEE AVE
 LA JOLLA, CA 92037-1205
 Phone: (858) 626-4123
 Fax:
 After Hours Phone: (858)
 626-4123
 Provider Gender: Female
 License number: A99634
 NPI: 1952503435
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton, Tri City
 Medical Ctr, Scripps Memorial
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MARTIN, LESLIE M

Provider ID: 64970
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9198
 Fax: (619) 543-8255
 After Hours Phone: (619)
 471-9198
 Provider Gender: Female

License number: G79006
 NPI: 1306895495
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MCGEHRIN, KEVIN M

Provider ID: 256019
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A140783
 NPI: 1972913101
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MCLNTYRE, JONATHAN S

Provider ID: 118235
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619)
 471-9186
 Provider Gender: Male
 License number: A149315
 NPI: 1134462211
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MIRACLE, CYNTHIA M

Provider ID: 64747
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE
 110
 LA JOLLA, CA 92037-1732

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858) 657-8000
 Provider Gender: Female
 License number: A82348
 NPI: 1700976636
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: St Agnes Medical Center, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MULRONEY, CAROLYN M
 Provider ID: 64458
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MULRONEY, CAROLYN M
 Provider ID: 64458
 Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MULRONEY, CAROLYN M
 Provider ID: 64458
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MULRONEY, CAROLYN M
 Provider ID: 64458
 Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MULRONEY, CAROLYN M
 Provider ID: 64458
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Female
 License number: A48368
 NPI: 1215124664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NOBARI, MATTHEW M

Provider ID: 242034
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NOKES, BRANDON T

Provider ID: 287581
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155580
NPI: 1487040051
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ORR, JEREMY E

Provider ID: 99608
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARDEE, PERRIE E

Provider ID: 101190
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: A123826
NPI: 1578850988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARKER, BARBARA A

Provider ID: 122167

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 822-6200
Fax:
After Hours Phone: (858)
822-6200
Provider Gender: Female
License number: G49044
NPI: 1629093927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARKER, BARBARA A

Provider ID: 64464
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
822-6173
Provider Gender: Female
License number: G49044
NPI: 1629093927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PATEL, KRUTI

Provider ID: 276542
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATEL, KRUTI

Provider ID: 283318

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDERSEN, BRIAN A

Provider ID: 102051
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858)
249-2500
Provider Gender: Male
License number: A117531
NPI: 1790913770
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PETTUS, JEREMY H

Provider ID: 127695
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A106382
NPI: 1225234982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

POTOK, OLIVIA A

Provider ID: 272707
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A141725
NPI: 1073951323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

QUARTAROLO, JENNIFER M

Provider ID: 65020
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619) 471-9198
Provider Gender: Female
License number: A96235
NPI: 1841213865
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAISINGHANI, AJIT B

Provider ID: 65281
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: G75914
NPI: 1831292796
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAMOS, PEDRO

Provider ID: 65023

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A91945
NPI: 1861566366
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REEVES, RYAN R

Provider ID: 78121
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A108745
NPI: 1548440902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REID, ERIN G

Provider ID: 64468
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: A73308
NPI: 1902852767
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RENARD, AYSEL

Provider ID: 271843
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A169429
NPI: 1225567456
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBIN, JOSHUA E

Provider ID: 117221
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: A120297
NPI: 1255610416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider ID:</i> 64742 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8939 VILLA LA JOLLA DR STE 100 LA JOLLA, CA 92037-1732 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A82421 <i>NPI:</i> 1396725701 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Uc Davis Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
SASAKI, REID A <i>Provider ID:</i> 65047 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A112780 <i>NPI:</i> 1972817302 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	SEBASKY, MEGHAN M <i>Provider ID:</i> 273963 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Female <i>License number:</i> A114146 <i>NPI:</i> 1538351408 <i>Provider English Spoken:</i> Yes	SEBASKY, MEGHAN M <i>Provider ID:</i> 273964 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A114146 <i>NPI:</i> 1538351408 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
SCHULTZ, CHRISTINA Y	SEBASKY, MEGHAN M <i>Provider ID:</i> 273963 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Female <i>License number:</i> A114146 <i>NPI:</i> 1538351408 <i>Provider English Spoken:</i> Yes	

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D. Directorio de proveedores de atención especializada

SEBASKY, MEGHAN M

Provider ID: 65053
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A114146
NPI: 1538351408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEGAR, SANDEEP

Provider ID: 118191
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (617) 471-9186
Fax:
After Hours Phone: (617) 471-9186
Provider Gender: Male
License number: A149780
NPI: 1982017067

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SELL, REBECCA E

Provider ID: 84395
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A91947
NPI: 1568470672

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

SEYMANN, GREGORY B

Provider ID: 65057
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9198
Fax: (619) 543-8255
After Hours Phone: (619) 471-9198
Provider Gender: Male
License number: A55150
NPI: 1710920442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAHATTO, LOBNA

Provider ID: 129679
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A117647
NPI: 1477879906

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAHATTO, LOBNA

Provider ID: 201323
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A117647
NPI: 1477879906
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
SHAH, MITA M
Provider ID: 64757
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Female
License number: A71739
NPI: 1194773010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SHATTIL, SANFORD J

Provider ID: 64478
Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: G22082
NPI: 1679530844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITHERMAN, KENTON O

Provider ID: 65065
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G84563
NPI: 1205888724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SMITH, CHELSEY J

Provider ID: 239921

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A126660

NPI: 1013264506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Phone: (858) 657-8000

Fax:

After Hours Phone: (858)

657-8000

Provider Gender: Female

License number: A107585

NPI: 1437387933

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Scripps Green Hospital, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAYLOR, DAVID S

Provider ID: 274470

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A169407

NPI: 1033572995

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TOROSIAN, KARO

Provider ID: 269269

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9834 GENESEE AVE STE 312

LA JOLLA, CA 92037-1221

Phone: (858) 558-8150

Fax: (858) 346-1024

After Hours Phone: (858)

558-8150

Provider Gender: Male

License number: 20A12445

NPI: 1275822082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

TRAN, HAO A

Provider ID: 110169
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A112846
NPI: 1891997078
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VARUGHESE, JAY I

Provider ID: 65084
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax: (619) 543-8255
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A105937
NPI: 1447490230

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VODKIN, IRINE E

Provider ID: 102011
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A113664
NPI: 1861762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VODKIN, IRINE E

Provider ID: 102015
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Female
License number: A113664
NPI: 1861762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VOSKANIAN, NATALIE N

Provider ID: 65317
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A100333
NPI: 1376721217
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, ANGELA C

Provider ID: 259536
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G62974
NPI: 1730133976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
WARD, DAVID M
Provider ID: 64762
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A31860
NPI: 1154347979
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WINTERS, KATHRYN D

Provider ID: 115620
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9185
Fax:
After Hours Phone: (619) 471-9185
Provider Gender: Female
License number: A141944
NPI: 1790128924
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WITZTUM, JOSEPH L

Provider ID: 65325
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLB (0912
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8440
Fax:
After Hours Phone: (858) 657-8440
Provider Gender: Male
License number: G29598
NPI: 1699791491
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA:	Provider English Spoken: Yes	Medical Group(s):
WOODELL, TYLER B	Provider Language(s) Spoken:	IPA: Ucsd Medical Group
Provider ID: 127033	Cultural Competency: No	
Board Certified Specialty: No	Hospital Affiliation: Ucsd Medical	YADLAPATI, RENA H
UCSD MEDICAL GROUP	Ctr, Ucsd La Jolla John Sally	Provider ID: 238587
9350 CAMPUS POINT DR	Thornton	Board Certified Specialty: No
LA JOLLA, CA 92037-1300	Medi-Cal Open Panel: No	UCSD MEDICAL GROUP
Phone: (619) 543-6397	Min/Max Age: None	9300 CAMPUS POINT DR
Fax:	American Sign Language (ASL):	LA JOLLA, CA 92037-1300
After Hours Phone: (619)	No	Phone: (800) 926-8273
543-6397	♿ Accessibility: W	Fax:
Provider Gender: Male	Hours: M-F 8AM-5PM, SA	After Hours Phone: (800)
License number: A127833	9AM-5PM	926-8273
NPI: 1528322393	Website:	Provider Gender: Female
Provider English Spoken: Yes	Email:	License number: A113362
Provider Language(s) Spoken:	Medical Group(s):	NPI: 1548597784
Cultural Competency: No	IPA:	Provider English Spoken: Yes
Hospital Affiliation: Ucsd Medical	YADLAPATI, RENA H	Provider Language(s) Spoken:
Ctr, Ucsd La Jolla John Sally	Provider ID: 238586	Cultural Competency: No
Thornton	Board Certified Specialty: No	Hospital Affiliation: Ucsd Medical
Medi-Cal Open Panel: No	UCSD MEDICAL GROUP	Ctr, Ucsd La Jolla John Sally
Min/Max Age: None	9350 CAMPUS POINT DR	Thornton
American Sign Language (ASL):	LA JOLLA, CA 92037-1300	Medi-Cal Open Panel: Yes
No	Phone: (800) 926-8273	Min/Max Age: 18/999
♿ Accessibility: W	Fax:	American Sign Language (ASL):
Hours: M-SA 9AM-5PM	After Hours Phone: (800)	No
Website:	926-8273	♿ Accessibility:
Email:	Provider Gender: Female	Hours: M-SA 9AM-5PM
Medical Group(s):	License number: A113362	Website:
IPA:	NPI: 1548597784	Email:
WOOTEN, DARCY A	Provider English Spoken: Yes	Medical Group(s):
Provider ID: 110397	Provider Language(s) Spoken:	IPA: Ucsd Medical Group
Board Certified Specialty: No	Cultural Competency: No	
UCSD MEDICAL GROUP	Hospital Affiliation: Ucsd Medical	YANG, JENNY Z
9300 CAMPUS POINT DR	Ctr, Ucsd La Jolla John Sally	Provider ID: 283025
LA JOLLA, CA 92037-1300	Thornton	Board Certified Specialty: No
Phone: (619) 471-9186	Medi-Cal Open Panel: Yes	UCSD MEDICAL GROUP
Fax: (619) 543-8255	Min/Max Age: 18/999	9300 CAMPUS POINT DR
After Hours Phone: (619)	American Sign Language (ASL):	LA JOLLA, CA 92037-1300
471-9186	No	Phone: (800) 926-8273
Provider Gender: Female	♿ Accessibility:	Fax: (888) 539-8781
License number: A114007	Hours: M-SA 9AM-5PM	After Hours Phone: (800)
NPI: 1538495973	Website:	926-8273
	Email:	Provider Gender: Female
		License number: A145538

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D. Directorio de proveedores de atención especializada

NPI: 1346636453
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp
 Coronado Hosp And Healthcare
 Ctr, Ucsd Medical Ctr, Ucsd La
 Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ZAYETS, STANISLAV

Provider ID: 125320
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619)
 471-9186
 Provider Gender: Male
 License number: A141681
 NPI: 1437313178
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA

9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ZHANG, SHERRY S

Provider ID: 272658
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A158102
 NPI: 1588198147
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS

Provider ID: 209561
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A112607
 NPI: 1871767384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HULL, ANDREW D

Provider ID: 209482
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858)
 657-8745
 Provider Gender: Male
 License number: A53578
 NPI: 1902862121
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Scripps Mercy Hospital, Scripps
 Mercy Hospital Chula Vista,

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D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Ucsd Medical Ctr,
Scripps Memorial Hospital, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAURENT, LOUISE C

Provider ID: 208639
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital Encinitas, Palomar
Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

MELBER, DORA J

Provider ID: 240599
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A147917
NPI: 1124413026
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hungarian
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOORE, THOMAS R

Provider ID: 208642
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858)
657-8745

Provider Gender: Male
License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TARSA, MARYAM

Provider ID: 209394
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A69894
NPI: 1295768638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr, Eisenhower
Medical Ctr

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TARSA, MARYAM

Provider ID: 285854
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A69894
NPI: 1295768638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Scripps Mercy Hospital,
Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr,
Eisenhower Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
WOELKERS, DOUGLAS A
Provider ID: 209383
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:

After Hours Phone: (858)
657-8745
Provider Gender: Male
License number: G77134
NPI: 1013965748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center,
Palomar Health Downtown
Campus, Ucsd La Jolla John
Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WOLF, RICHARD B

Provider ID: 209252
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A6028
NPI: 1497713846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Health Downtown Campus,
Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Ucsd Medical Ctr, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

FERNANDEZ, ERIKA F

Provider ID: 205765
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858)
249-5800

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: C131691
NPI: 1881609337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLEMBESKI, DAVID J

Provider ID: 205894
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest

Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MARC AURELE, KRISHELLE L

Provider ID: 206207
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
License number: A99634
NPI: 1952503435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MARC AURELE, KRISHELLE L

Provider ID: 206209
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9888 GENESEE AVE
 LA JOLLA, CA 92037-1205
Phone: (858) 626-4123
Fax: (760) 633-7998
After Hours Phone: (858) 626-4123
Provider Gender: Female
License number: A99634
NPI: 1952503435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MESTAN, KAREN K

Provider ID: 285931
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

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D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
License number: C173648
NPI: 1942253356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAMOS, CARLOS G

Provider ID: 206062
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (619) 543-3812
After Hours Phone: (858) 249-5800
Provider Gender: Male
License number: A91944
NPI: 1205047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, El Centro Regional Medical

Center, Southwest Healthcare
System Wildomar, Southwest
Healthcare System Murrieta,
Rady Childrens Hospital San
Diego, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SAJTI, ENIKO C

Provider ID: 206170
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
License number: A115973
NPI: 1649433103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp And Resrch Ctr At
Oakland, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEPHROLOGY

BOISKIN, MARK M

Provider ID: 40762
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas,
Scripps Memorial Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BOISKIN, MARK M , MD

Provider ID: 40762

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BOISKIN, MARK M

Provider ID: 40762
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
Phone: (858) 810-8000
Fax: (858) 346-1024
After Hours Phone: (858) 810-8000
Provider Gender: Male

License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CUNARD, ROBYN A

Provider ID: 64733
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax: (858) 657-8066
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A55378
NPI: 1609983253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GABBAI, FRANCIS B

Provider ID: 64735
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A45614
NPI: 1356356034
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARIMELLA, PRANAV S

Provider ID: 110160
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 249-2500
 Fax:
 After Hours Phone: (858) 249-2500
 Provider Gender: Male
 License number: A143549
 NPI: 1477880102
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

IX, JOACHIM H

Provider ID: 64740
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
 Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858) 657-8000
 Provider Gender: Male
 License number: A77110
 NPI: 1720017536
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LAKHERA, YOGITA, MD

Provider ID: 109353
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Female
 License number: A125173
 NPI: 1083972483
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LAKHERA, YOGITA

Provider ID: 109353
 Board Certified Specialty: No

BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 810-8000
 Fax:
 After Hours Phone: (858) 810-8000
 Provider Gender: Female
 License number: A125173
 NPI: 1083972483
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LAKHERA, YOGITA

Provider ID: 262128
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Female
 License number: A125173

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1083972483
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MEHTA, RAVINDRA L

Provider ID: 64746
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
 Phone: (858) 657-8000
 Fax: (858) 657-8558
 After Hours Phone: (858) 657-8000
 Provider Gender: Male
 License number: A48361
 NPI: 1295818102
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Punjabi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:
MULLANEY, SCOTT R
 Provider ID: 64750
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
 Phone: (858) 657-8000
 Fax: (619) 543-7368
 After Hours Phone: (858) 657-8000
 Provider Gender: Male
 License number: A65695
 NPI: 1285742726
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RIFKIN, DENA E

Provider ID: 64755
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732

Phone: (858) 657-8000
 Fax: (858) 657-8558
 After Hours Phone: (858) 657-8000
 Provider Gender: Female
 License number: A109186
 NPI: 1578519203
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SANCHEZ, AMBER P

Provider ID: 64756
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8939 VILLA LA JOLLA DR STE 110
 LA JOLLA, CA 92037-1732
 Phone: (818) 657-8000
 Fax:
 After Hours Phone: (818) 657-8000
 Provider Gender: Female
 License number: A91770
 NPI: 1700963907
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 8939 VILLA LA JOLLA DR STE
No 110
Accessibility: LA JOLLA, CA 92037-1732
Hours: M-SA 9AM-5PM *Phone:* (858) 657-8000
Website: *Fax:* (858) 657-8558
Email: *After Hours Phone:* (858)
Medical Group(s): 657-8000
IPA: *Provider Gender:* Female
License number: A93789
NPI: 1235207234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Punjabi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANCHEZ, AMBER P

Provider ID: 65040
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A91770
NPI: 1700963907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SINGH, PRABHLEEN

Provider ID: 64759
Board Certified Specialty: No
UCSD MEDICAL GROUP

STEER, DYLAN L

Provider ID: 257474
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male
License number: A65604
NPI: 1437154978
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct, Community Care Ipa
Llc, Imperial Health Holdings
Medical Group-Sd

STEER, DYLAN L

Provider ID: 262251
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037-1221
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858)
558-8150
Provider Gender: Male
License number: A65604
NPI: 1437154978
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Sharp
Memorial Hospital, Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Medical Group-Sd STEER, DYLAN L , MD <i>Provider ID:</i> 31399 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221 <i>Phone:</i> (858) 558-8150 <i>Fax:</i> (858) 346-1024 <i>After Hours Phone:</i> (858) 558-8150 <i>Provider Gender:</i> Male <i>License number:</i> A65604 <i>NPI:</i> 1437154978 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Phone:</i> (858) 810-8000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 810-8000 <i>Provider Gender:</i> Male <i>License number:</i> 20A12445 <i>NPI:</i> 1275822082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.balboacare.com <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
STEER, DYLAN L <i>Provider ID:</i> 31399 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221 <i>Phone:</i> (858) 810-8000 <i>Fax:</i> (858) 554-5152 <i>After Hours Phone:</i> (858) 810-8000 <i>Provider Gender:</i> Male <i>License number:</i> A65604 <i>NPI:</i> 1437154978 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 9AM-5PM, SA 9AM-5PM <i>Website:</i> www.balboacare.com <i>Email:</i> <i>Medical Group(s):</i> IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings	TOROSIAN, KARO <i>Provider ID:</i> 118749 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221	TOROSIAN, KARO <i>Provider ID:</i> 262330 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 9834 GENESEE AVE STE 312 LA JOLLA, CA 92037-1221 <i>Phone:</i> (858) 558-8150 <i>Fax:</i> (858) 346-1024 <i>After Hours Phone:</i> (858) 558-8150 <i>Provider Gender:</i> Male <i>License number:</i> 20A12445 <i>NPI:</i> 1275822082 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY CHILD

HAAS, RICHARD H

Provider ID: 65184
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLB (0912)
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NEUROLOGY

BEVINS, ELIZABETH A

Provider ID: 277726
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A145182
NPI: 1013395151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BLUMENFELD, ANDREW M

Provider ID: 277503

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE # 505
 LA JOLLA, CA 92037-1224
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Male
License number: A47863
NPI: 1164459913
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BREWER, JAMES B

Provider ID: 65131
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: A89348
NPI: 1033144985
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, DILLON Y

Provider ID: 259995
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Male
License number: A133170
NPI: 1841633914
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COREY BLOOM, JODY P

Provider ID: 65152

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858) 657-8540
Provider Gender: Female
License number: G62847
NPI: 1053400093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COUGHLIN, DAVID G

Provider ID: 240950
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A162063
NPI: 1740543784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ELLIS, RONALD J

Provider ID: 65166
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8540
Fax: (858) 657-8549
After Hours Phone: (858) 657-8540
Provider Gender: Male
License number: G70658
NPI: 1992763114
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GALASKO, DOUGLAS R

Provider ID: 65172
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8540
 Fax: (858) 657-8549
 After Hours Phone: (858) 657-8540
 Provider Gender: Male
 License number: A45023
 NPI: 1336197730
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HANNAWI, ANDREW P

Provider ID: 284938
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A153161
 NPI: 1194179135
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

HEMMEN, THOMAS M

Provider ID: 65188
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (858) 249-2500
 Fax:
 After Hours Phone: (858) 249-2500
 Provider Gender: Male
 License number: A72645
 NPI: 1902821945
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

IRAGUIMADOZ, VICENTE J

Provider ID: 246701
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8540
 Fax:
 After Hours Phone: (858) 657-8540
 Provider Gender: Male
 License number: A31274
 NPI: 1053326710
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

IRAGUIMADOZ, VICENTE J

Provider ID: 65199
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (858) 249-2500
 Fax:
 After Hours Phone: (858) 249-2500
 Provider Gender: Male
 License number: A31274
 NPI: 1053326710
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): Phone: (858) 657-8540

No

♿ *Accessibility:* P, EB, IB, E, R, T *After Hours Phone:* (858)

Hours: M-SA 9AM-5PM 657-8540

Website: *Provider Gender:* Male

Email: *License number:* G89360

Medical Group(s): *NPI:* 1043325939

IPA: Ucsd Medical Group *Provider English Spoken:* Yes

KANSAL, LEENA R

Provider ID: 65207

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 249-2500

Fax:

After Hours Phone: (858)

249-2500

Provider Gender: Female

License number: A99271

NPI: 1871759084

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T *After Hours Phone:* (800)

Hours: M-SA 9AM-5PM 926-8273

Website:

Email:

Medical Group(s):

IPA:

KINKEL, REVERE P

Provider ID: 83655

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

LEE, DAVID J

Provider ID: 246264

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLB

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A124329

NPI: 1871884130

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LEGER, GABRIEL C

Provider ID: 247609

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: C155902

NPI: 1720367899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MEYER, BRETT C

Provider ID: 65249

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 249-2500 Fax: After Hours Phone: (858) 249-2500 Provider Gender: Male License number: A70903 NPI: 1316011265 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Hospital, Palomar Medical Center, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	IPA: Ucsd Medical Group
NIELSEN, AMY C Provider ID: 277009 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9850 GENESEE AVE STE 530 LA JOLLA, CA 92037-1213 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: 20A11494 NPI: 1730110529 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado	OLSON, SCOTT E Provider ID: 65270 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-1636 Fax: After Hours Phone: (858) 657-1636 Provider Gender: Male License number: A83715 NPI: 1376568659 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	OLSON, SCOTT E Provider ID: 65374 Board Certified Specialty: No UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A83715 NPI: 1376568659 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
	PICCIONI, DAVID E Provider ID: 84330 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503	

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D. Directorio de proveedores de atención especializada

Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Male
 License number: A100663
 NPI: 1851542575
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald Reagan UCLA Med Ctr, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

QAYOUMI, WALI Z

Provider ID: 284369
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9500 GILMAN DR # 2069
 LA JOLLA, CA 92093-5004
 Phone: (858) 822-5881
 Fax: (888) 539-8781
 After Hours Phone: (858) 822-5881
 Provider Gender: Male
 License number: A168429
 NPI: 1093178220
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

QAYOUMI, WALI Z

Provider ID: 284371
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLB
 LA JOLLA, CA 92037-1300
 Phone: (619) 284-3746
 Fax: (888) 579-8781
 After Hours Phone: (619) 284-3746
 Provider Gender: Male
 License number: A168429
 NPI: 1093178220
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RAVITS, JOHN M

Provider ID: 65283
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B
 LA JOLLA, CA 92037-1300
 Phone: (858) 249-2500
 Fax:
 After Hours Phone: (858) 249-2500
 Provider Gender: Male
 License number: G43695
 NPI: 1396858965
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SCHULTE, JESSICA D

Provider ID: 284819
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax: (858) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A162688
 NPI: 1467870576
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsf Medical Center At Mount Zion, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SHTRAHMAN, MATTHEW

Provider ID: 114340

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: A108752

NPI: 1740440460

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TECOMA, EVELYN S

Provider ID: 65310

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 249-2500

Fax:

After Hours Phone: (858)

249-2500

Provider Gender: Female

License number: G58138

NPI: 1174556518

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TUSZYNSKI, MARK H

Provider ID: 65314

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 249-2500

Fax:

After Hours Phone: (858)

249-2500

Provider Gender: Male

License number: G56665

NPI: 1669405007

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VIIRRE, ERIK S

Provider ID: 65316

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8540

Fax: (858) 657-8549

After Hours Phone: (858)

657-8540

Provider Gender: Male

License number: G82354

NPI: 1093743601

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WANG, CHUNYANG T

Provider ID: 285922

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE 530

LA JOLLA, CA 92037-1213

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: A105660
 NPI: 1386890770
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WIEGAND, SARAH E

Provider ID: 284620
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: 20A16503
 NPI: 1164818035
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

NUCLEAR MEDICINE

BELEZZUOLI, ERNEST V

Provider ID: 64812
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-3405
 Fax:
 After Hours Phone: (619) 543-3405
 Provider Gender: Male
 License number: G74168
 NPI: 1083703805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HOH, CARL K

Provider ID: 64911
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-3405
 Fax:
 After Hours Phone: (619) 543-3405
 Provider Gender: Male
 License number: G61309
 NPI: 1962427682
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OBSTETRICS / GYNECOLOGY

ALPERIN, MARIANN

Provider ID: 65116
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8737
 Fax:
 After Hours Phone: (858) 657-8737
 Provider Gender: Female
 License number: A102879
 NPI: 1033266879

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALVARADO, JORGE L

Provider ID: 269564
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A139473
NPI: 1538588561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

AVERBACH, SARAH H

Provider ID: 115249
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6777
Fax: (619) 543-3703
After Hours Phone: (619) 543-6777
Provider Gender: Female
License number: A128990
NPI: 1700012457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsd Medical Ctr, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BINDER, PRATIBHA S

Provider ID: 121153
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A149945
NPI: 1174758031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BINDER, PRATIBHA S

Provider ID: 273225
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A149945
NPI: 1174758031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BONDRE, IOANA L

Provider ID: 284310
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171540
NPI: 1326579863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BONDRE, IOANA L

Provider ID: 284311
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171540
NPI: 1326579863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GABBY, LAURYN C

Provider ID: 269691
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A151539
NPI: 1003330572
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUPTA, PRATIMA

Provider ID: 257546
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A832373
NPI: 1891749842
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278916
Board Certified Specialty: No
 UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 923-8273
Fax: (888) 539-8781
After Hours Phone: (800) 923-8273
Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A

Provider ID: 278918
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEBERT, STEPHEN A

Provider ID: 65187
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: G40602
NPI: 1730127069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOANG, MAI P

Provider ID: 208295
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A130031
NPI: 1104143593
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOM, MARIANNE S

Provider ID: 242752
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A146335
NPI: 1972047397
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	IPA: Ucsd Medical Group KELLY, THOMAS F Provider ID: 65211 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-8745 Fax: After Hours Phone: (858) 657-8745 Provider Gender: Male License number: G60630 NPI: 1336203496 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A155090 NPI: 1780073635 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
HULL, ANDREW D Provider ID: 65197 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-2347 Fax: After Hours Phone: (619) 543-2347 Provider Gender: Male License number: A53578 NPI: 1902862121 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):	KLEIN, DAVID A Provider ID: 271558 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300	KLEIN, DAVID A Provider ID: 271559 Board Certified Specialty: No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A155090 NPI: 1780073635 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAMALE-SMITH, LEAH M

Provider ID: 286230

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A135831

NPI: 1396904876

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LUKACZ, EMILY S

Provider ID: 83716

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Female

License number: A63540

NPI: 1750339446

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MACKAY, GILLIAN

Provider ID: 128454

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A113346

NPI: 1770702177

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MACKAY, GILLIAN

Provider ID: 200964

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 200

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A113346

NPI: 1770702177

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MEADOWS, AUDRA R

Provider ID: 285739

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEADOWS, AUDRA R

Provider ID: 285740
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEURICE, MARIELLE ERENDIRA LUCILLE

Provider ID: 284267
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A159003
NPI: 1720510779
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: University
Hsp Of San Diego Co, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEURICE, MARIELLE ERENDIRA LUCILLE

Provider ID: 284269
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A159003
NPI: 1720510779
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: University
Hsp Of San Diego Co, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOORE, THOMAS R

Provider ID: 65259
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8745
Fax:
After Hours Phone: (858) 657-8745
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G49930
 NPI: 1184682379
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284285
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A158192
 NPI: 1841722485
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, University Hsp Of San Diego Co
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PLAXE, STEVEN C
 Provider ID: 64465
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Male
 License number: G64817
 NPI: 1942356795
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RESNIK, JAMIE L

Provider ID: 271535
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female

License number: A66580
 NPI: 1558310557
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RIES, MAUREEN C

Provider ID: 125252
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: A127234
 NPI: 1750544516
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Indonesian, Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> RIVAS, RENEE N <i>Provider ID:</i> 284295 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A173043 <i>NPI:</i> 1295263861 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group RIVAS, RENEE N <i>Provider ID:</i> 284297 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337	<i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A173043 <i>NPI:</i> 1295263861 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group SAENZ, CHERYL C <i>Provider ID:</i> 64472 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-6173 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-6173 <i>Provider Gender:</i> Female <i>License number:</i> G74647 <i>NPI:</i> 1396818134 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> SANDOVAL, SELINA M <i>Provider ID:</i> 270561 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 8910 VILLA LA JOLLA DR # 200 LA JOLLA, CA 92037-1701 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A167853 <i>NPI:</i> 1336599653 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group SANDOVAL, SELINA M <i>Provider ID:</i> 270562 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300
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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A167853
 NPI: 1336599653
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s): IPA: Ucsd Medical Group

SUYAMA, JULIE A
 Provider ID: 284289
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A172670
 NPI: 1306372800
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes

Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s): IPA: Ucsd Medical Group

SU, HUI CHUN I
 Provider ID: 269338
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9350 CAMPUS POINT DR # LLC
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax: (858) 657-8666
 After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: A110340
 NPI: 1053466011
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s): IPA: Community Care Ipa Llc

SU, HUI CHUN I
 Provider ID: 65306
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax: After Hours Phone: (619) 543-2347
 Provider Gender: Female
 License number: A110340
 NPI: 1053466011
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s): IPA: Community Care Ipa Llc

SWENSON, HELEN
 Provider ID: 126502
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax: After Hours Phone: (858) 657-8745
 Provider Gender: Female
 License number: A155774
 NPI: 1952721243
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TARSA, MARYAM

Provider ID: 65308
 Board Certified Specialty: No
 UCSD OB GYN MED GRP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8745
 Fax:
 After Hours Phone: (858)
 657-8745
 Provider Gender: Female
 License number: A69894
 NPI: 1295768638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Memorial Hospital
 Encinitas, Palomar Medical
 Center, Scripps Mercy Hospital,
 Ucsd La Jolla John Sally
 Thornton, Ucsd Medical Ctr,
 Eisenhower Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Ucsd Medical Group
THOMSON, SAMANTHA L
 Provider ID: 285173
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A149038
 NPI: 1689013468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Cedars Sinai
 Medical Center, Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

THOMSON, SAMANTHA L
 Provider ID: 285175
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A149038

NPI: 1689013468
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Cedars Sinai
 Medical Center, Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TILFORD, SARAH A

Provider ID: 126505
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 200
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A154086
 NPI: 1194139766
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

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D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> TOLOUBEYDOKHTI, TANNAZ <i>Provider ID:</i> 98884 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female <i>License number:</i> A134477 <i>NPI:</i> 1477846095 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> WEBER, AKILAH F <i>Provider ID:</i> 84962 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> (858) 657-8666 <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female	<i>License number:</i> C56035 <i>NPI:</i> 1760652713 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network WOELKERS, DOUGLAS A <i>Provider ID:</i> 65326 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Male <i>License number:</i> G77134 <i>NPI:</i> 1013965748 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd	La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group ZHOU, BETH B <i>Provider ID:</i> 240066 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9444 MEDICAL CENTER DR LA JOLLA, CA 92037-1337 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A162098 <i>NPI:</i> 1558748186 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
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ONCOLOGY MEDICAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BANERJEE, PUSHPENDU

Provider ID: 54041

Board Certified Specialty: No
CALIFORNIA CANCER

ASSOCS FOR RESEARCH AND
EXCELL

9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229

Phone: (858) 552-1410

Fax: (858) 552-0929

After Hours Phone: (858)
552-1410

Provider Gender: Male

License number: A69490

NPI: 1164497855

Provider English Spoken: Yes

Provider Language(s) Spoken:
Hindi

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady
Childrens Hospital San Diego,
Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 16/120

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

BOLES, SARAH G

Provider ID: 64411

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax: (858) 822-6196

After Hours Phone: (858)
822-6100

Provider Gender: Female

License number: A82562

NPI: 1245391242

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HOWELL, STEPHEN B

Provider ID: 64435

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: G25869

NPI: 1114942802

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MCHALE, MICHAEL T

Provider ID: 64450

Board Certified Specialty: No
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)
822-6173

Provider Gender: Male

License number: G83172

NPI: 1508828179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

REID, TONY R

Provider ID: 64469

Board Certified Specialty: No
UC SAN DIEGO CANCER CTR

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)
822-6173

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G76747
NPI: 1346323904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REID, TONY R

Provider ID: 64469
Board Certified Specialty: No
 UC SAN DIEGO CANCER CTR
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
 822-6100
Provider Gender: Male
License number: G76747
NPI: 1346323904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REID, TONY R

Provider ID: 64469
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
 822-6100
Provider Gender: Male
License number: G76747
NPI: 1346323904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REID, TONY R

Provider ID: 64469
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858)
 822-6173
Provider Gender: Male
License number: G76747
NPI: 1346323904
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SINCLAIR, JAMES M , MD

Provider ID: 257002
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax: (858) 552-0929
After Hours Phone: (858)
 552-1410
Provider Gender: Male
License number: G48926
NPI: 1356300230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SINCLAIR, JAMES M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 54027
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037-1229
Phone: (858) 552-1410
Fax:
After Hours Phone: (858) 552-1410
Provider Gender: Male
License number: G48926
NPI: 1356300230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

OPHTHALMOLOGY

AFSHARI, NATALIE A
Provider ID: 65332
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290

Provider Gender: Female
License number: C51849
NPI: 1538126735
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAXTER, SALLY L
Provider ID: 272787
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (888) 539-8781
After Hours Phone: (858) 534-6290
Provider Gender: Female
License number: A140952
NPI: 1912325184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEAZER, ALEX P
Provider ID: 272802
Board Certified Specialty: No
UCSD MEDICAL GROUP
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169030
NPI: 1942662168
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BINDER, NICHOLAS R , MD
Provider ID: 268757
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A124698
 NPI: 1306076716
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BOKOSKY, JOHN E

Provider ID: 84265
 Board Certified Specialty: No
 EYE CARE OF SAN DIEGO MED OFFICE
 9834 GENESEE AVE STE 428
 LA JOLLA, CA 92037-1264
 Phone: (800) 765-2737
 Fax:
 After Hours Phone: (800) 765-2737
 Provider Gender: Male
 License number: G51651
 NPI: 1245215748
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BROWN, STUART I

Provider ID: 65335
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax: (858) 534-1342
 After Hours Phone: (858) 534-6290
 Provider Gender: Male
 License number: C40767
 NPI: 1356376347
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BRUMMEL, KIRSTA L

Provider ID: 240634
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: 20A11590
 NPI: 1003085481
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald Reagan UCLA Med Ctr, Santa Monica UCLA Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CAMP, ANDREW S

Provider ID: 111066
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax:
 After Hours Phone: (858) 534-6290
 Provider Gender: Male
 License number: A142062
 NPI: 1326300377
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens

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D. Directorio de proveedores de atención especializada

Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHANG, TOM S , MD

Provider ID: 270366
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: A69909
 NPI: 1609848969
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cantonese
 Cultural Competency: No
 Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc
CHAO, DANIEL L
 Provider ID: 112325
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax:
 After Hours Phone: (858) 534-6290
 Provider Gender: Male
 License number: A130361
 NPI: 1891011953
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At Ucsf
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHOPLIN, NEIL T

Provider ID: 84263
 Board Certified Specialty: No
 EYE CARE OF SAN DIEGO
 MED OFFICE
 9834 GENESEE AVE STE 428
 LA JOLLA, CA 92037-1264
 Phone: (800) 765-2737
 Fax:
 After Hours Phone: (800) 765-2737
 Provider Gender: Male
 License number: G57042

NPI: 1144205642
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CODEN, DANIEL J , MD

Provider ID: 269295
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
 Provider Gender: Male
 License number: G57587
 NPI: 1942317508
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

ECHEGOYEN, JULIO C , MD

Provider ID: 257136

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858)

534-6290

Provider Gender: Male

License number: A121431

NPI: 1770801540

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Paradise Valley

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FERREYRA, HENRY A

Provider ID: 65341

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858)

534-6290

Provider Gender: Male

License number: A77921

NPI: 1669497822

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Doctors

Medical Center, Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FREEMAN, WILLIAM

Provider ID: 65342

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax:

After Hours Phone: (858)

534-6290

Provider Gender: Male

License number: G51579

NPI: 1518983352

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GARFF, KEVIN

Provider ID: 239604

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A160988

NPI: 1609258920

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GARFF, KEVIN

Provider ID: 239605

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A160988 NPI: 1609258920 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Group-Sd GRANET, DAVID B Provider ID: 65344 Board Certified Specialty: No UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 Phone: (858) 534-6290 Fax: After Hours Phone: (858) 534-6290 Provider Gender: Male License number: G77597 NPI: 1982629036 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
GOLDBAUM, MICHAEL H Provider ID: 65343 Board Certified Specialty: Yes UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 Phone: (858) 534-6290 Fax: After Hours Phone: (858) 534-6290 Provider Gender: Male License number: C32010 NPI: 1720157142 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No	GOLLOGLY, HEIDRUN E , MD Provider ID: 269128 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037-1208 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Female License number: A134761 NPI: 1477879823 Provider English Spoken: Yes Provider Language(s) Spoken: French, German, Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical	HAW, WELDON W Provider ID: 65345 Board Certified Specialty: No UCSD MEDICAL GROUP 9415 CAMPUS POINT DR LA JOLLA, CA 92093-1350 Phone: (858) 534-6290 Fax: (858) 822-1849 After Hours Phone: (858) 534-6290 Provider Gender: Male License number: A60743 NPI: 1710945357

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HEICHEL, CHRISTOPHER W

Provider ID: 65346
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-4846
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A75001
NPI: 1083667307
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
HO, JOSEPH
Provider ID: 101278
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A137389
NPI: 1962766451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Temecula Valley Hospital Inc, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Desert Regional Med Ctr, Grossmont Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HUANG, ALEX A
Provider ID: 65347
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350

KIKKAWA, DON O
Provider ID: 65349
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 534-7859
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: G65447
NPI: 1932202371
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A111999
NPI: 1821246141
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Huntington Memorial Hospital, Ronald Reagan UCLA Med Ctr, Ucsd Medical Ctr, Lac Usc Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIKKAWA, DON O
Provider ID: 65349
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 534-7859
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: G65447
NPI: 1932202371
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KORN, BOBBY S

Provider ID: 65350
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A81749
NPI: 1174551006
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, JEFFREY E

Provider ID: 65352

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-1849
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A97291
NPI: 1801943279
Provider English Spoken: Yes
Provider Language(s) Spoken: Yue Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIU, XIONGFEI

Provider ID: 239816
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A144438
NPI: 1497135156
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Mercy General Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LI, ALEXANDRIA L

Provider ID: 272832
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A168107
NPI: 1841652864
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MCGRAW, JOSEPH P , MD

Provider ID: 269707
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269183
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MOVAGHAR, MANSOOR

Provider ID: 215055
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A100897
NPI: 1497792220
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

NGUYEN, THAO P

Provider ID: 65355
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 278-5393
After Hours Phone: (858) 534-6290
Provider Gender: Female
License number: G81689
NPI: 1154352185
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NUDLEMAN, ERIC D

Provider ID: 110388
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 534-6290
 Fax: (858) 822-1849
 After Hours Phone: (858) 534-6290
 Provider Gender: Male
 License number: A131592
 NPI: 1154582575
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OZZELLO, DANIEL J

Provider ID: 241983
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A161485
 NPI: 1073992731
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PERRY, ARTHUR C , MD

Provider ID: 265703
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010
 Provider Gender: Male
 License number: C37934
 NPI: 1194832725
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PRATT, STEVEN G , MD

Provider ID: 269324

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (866) 333-7922
 Provider Gender: Male
 License number: G32379
 NPI: 1407963044
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ROBBINS, SHIRA L

Provider ID: 65359
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 534-6290
 Fax:
 After Hours Phone: (858) 534-6290
 Provider Gender: Female
 License number: A78486
 NPI: 1508814914
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAMUEL, MICHAEL A , MD
Provider ID: 268596
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Huntington Memorial Hospital, Desert Regional Med Ctr, Eisenhower Medical Ctr, Pioneers Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
SAVINO, PETER J
Provider ID: 65361
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: A29965
NPI: 1467451898
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHONBACH, ETIENNE M
Provider ID: 284432
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172673

NPI: 1073040580
Provider English Spoken: Yes
Provider Language(s) Spoken: German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SLIGHT, JOHN R
Provider ID: 65363
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-1849
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: C25107
NPI: 1306971239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SONG, DELU

Provider ID: 284425
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A173049
NPI: 1437689536
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOPILOW, NICOLE

Provider ID: 284348
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A171573
NPI: 1215468376
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VASILE, CRISTIANA G

Provider ID: 115739
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 534-1625
After Hours Phone: (858) 534-6290
Provider Gender: Female
License number: A122457
NPI: 1891002044
Provider English Spoken: Yes
Provider Language(s) Spoken: Romanian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

WEINREB, ROBERT N

Provider ID: 65366
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: G33398
NPI: 1093764177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WELSBIE, DEREK S

Provider ID: 112328
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9415 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax:
After Hours Phone: (858) 534-6290
Provider Gender: Male
License number: C143481
NPI: 1588869945

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WU, CHRIS Y

Provider ID: 239582

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A161633

NPI: 1265829345

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OSTEOPATHIC MANIPULATIVE THERAPY

PORTERA, ARIEL M

Provider ID: 273320

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A16832

NPI: 1841721784

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

OTOLARYNGOLOGY

BRUMUND, KEVIN T

Provider ID: 65134

Board Certified Specialty: No

UCSD OTOLARYNGOLOGY

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8591

Fax:

After Hours Phone: (858) 657-8591

Provider Gender: Male

License number: A91099

NPI: 1033193669

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CALZADA, AUDREY P , MD

Provider ID: 269278

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

9834 GENESEE AVE STE 111

LA JOLLA, CA 92037-1214

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858) 909-0770

Provider Gender: Female

License number: A107965

NPI: 1619113230

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Rady Childrens Hospital San Diego,

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D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, ANGELA A

Provider ID: 269308
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9834 GENESEE AVE STE 111
 LA JOLLA, CA 92037-1214
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858)
 909-0770
Provider Gender: Female
License number: A100380
NPI: 1730382318
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Mercy Hospital,
 Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DECONDE, ADAM S

Provider ID: 97546
Board Certified Specialty: No
 UCSD OTOLARYNGOLOGY
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax: (858) 657-8682
After Hours Phone: (858)
 657-8590
Provider Gender: Male
License number: A110107
NPI: 1588988919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DECONDE, ADAM S

Provider ID: 97547
Board Certified Specialty: Yes
 UCSD OTOLARYNGOLOGY
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8590
Fax: (858) 657-8682
After Hours Phone: (858)
 657-8590
Provider Gender: Male
License number: A110107
NPI: 1588988919
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GREENE, JACQUELINE J

Provider ID: 272958
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR # LLA
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A161242
NPI: 1144583931
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WATSON, DEBORAH

Provider ID: 65322
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Female
License number: G79374
NPI: 1346270816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISMAN, ROBERT A

Provider ID: 64491
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Male
License number: G28603
NPI: 1346293958
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISMAN, ROBERT A

Provider ID: 65323
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: G28603
NPI: 1346293958
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISSBROD, PHILIP A

Provider ID: 64492

Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Male
License number: A118221
NPI: 1366590853
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEISSBROD, PHILIP A

Provider ID: 65324
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Male
License number: A118221
NPI: 1366590853
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Green Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YAN, CAROL H

Provider ID: 242138
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLA
LA JOLLA, CA 92037-1300
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Female
License number: A149042
NPI: 1619237260
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATHOLOGY ANATOMIC

DATNOW, BRIAN

Provider ID: 275738
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A31095
NPI: 1609832633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FADARE, OLUWOLE

Provider ID: 275706
Board Certified Specialty: No
UCSD MEDICAL GROUP
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C131462
NPI: 1619955804

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FERGUSON, COLE J

Provider ID: 274458
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (629) 543-2827
Fax: (888) 539-8781
After Hours Phone: (629) 543-2827
Provider Gender: Male
License number: A170171
NPI: 1134550643
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

FERGUSON, COLE J

Provider ID: 275700

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A170171

NPI: 1134550643

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HANSEN, LAWRENCE A

Provider ID: 275768

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G62538

NPI: 1760407498

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PARAST, MANA M

Provider ID: 275889

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A102496

NPI: 1629163100

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PATEL, CHARM I

Provider ID: 259112

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: C146702

NPI: 1730389362

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

POWELL, HENRY C

Provider ID: 275779

Board Certified Specialty: No

UCSD MEDICAL GROUP

9444 MEDICAL CENTER DR

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A25597

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1295778348
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

VALASEK, MARK A

Provider ID: 275837
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A127165
 NPI: 1588808448
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Ucsd Medical Group
WONG, RICHARD L
 Provider ID: 275815
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A136239
 NPI: 1275084295
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL J

Provider ID: 275735
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
 License number: G48254
 NPI: 1174679849
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, El Centro Regional Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LE DZUNG, THE

Provider ID: 275733
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G71291
 NPI: 1770526931
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	RADY CHILDRENS HEALTH NETWORK 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> A155419 <i>NPI:</i> 1528454188 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Marian Regional Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
PEDIATRIC RADIOLOGY		
PUGMIRE, BRIAN S <i>Provider ID:</i> 285402 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A138998 <i>NPI:</i> 1609190578 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Valley Childrens Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	FERNANDEZ, ERIKA F <i>Provider ID:</i> 117520 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> C131691 <i>NPI:</i> 1881609337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	GOLEMBESKI, DAVID J <i>Provider ID:</i> 117315 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Male <i>License number:</i> G63111 <i>NPI:</i> 1376614131 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No
PEDIATRICS		
BAI-TONG, SHIYU S <i>Provider ID:</i> 283287 <i>Board Certified Specialty:</i> No		

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

GREENBERG, MARK

Provider ID: 64888
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-5720
 Fax:
 After Hours Phone: (619) 543-5720
 Provider Gender: Male
 License number: G63733
 NPI: 1710906375
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

JONES, MARILYN C

Provider ID: 65203
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619) 543-2347
 Provider Gender: Female
 License number: G30850
 NPI: 1295806040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 83641
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G30850
 NPI: 1295806040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

LONGHURST, CHRISTOPHER A

Provider ID: 269432
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A80051
 NPI: 1639238462
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

RAMOS, CARLOS G <i>Provider ID:</i> 117366 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Male <i>License number:</i> A91944 <i>NPI:</i> 1205047545 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> A115973 <i>NPI:</i> 1649433103 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
SAJTI, ENIKO C <i>Provider ID:</i> 117480 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN	STRAIT, MARIE I <i>Provider ID:</i> 273472 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-5800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-5800 <i>Provider Gender:</i> Female <i>License number:</i> C167351 <i>NPI:</i> 1669633012 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	PHYSICAL MEDICINE / REHABILITATION CHEN, JEFFREY L <i>Provider ID:</i> 124633 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (858) 657-6035 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-6035 <i>Provider Gender:</i> Male <i>License number:</i> A102762 <i>NPI:</i> 1811183700 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHEN, JEFFREY L

Provider ID: 65143
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: A102762
 NPI: 1811183700
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KASENDORF, ROGER A

Provider ID: 209021
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9834 GENESEE AVE STE 221
 LA JOLLA, CA 92037-1215
 Phone: (858) 558-1275
 Fax: (858) 244-0152
 After Hours Phone: (858) 558-1275
 Provider Gender: Male
 License number: 20A12928
 NPI: 1356371884
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LE, JOAN T

Provider ID: 243379
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A99391
 NPI: 1447460050
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA M

Provider ID: 243366
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA53570
 NPI: 1750734893
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ALBRIGHT, KELSEY A

Provider ID: 284764
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA57996
 NPI: 1235653148
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ARMEEN, GARY P
 Provider ID: 247036
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PA21505
 NPI: 1760774863
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BOYD, LISA N
 Provider ID: 217650
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA20326
 NPI: 1871859421
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BURNEY, MELISSA A
 Provider ID: 285890
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 530
 LA JOLLA, CA 92037-1213
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: PA58612
 NPI: 1386260842
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

BRUECKNER, TAMMIE N
 Provider ID: 255557
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA57558
 NPI: 1407212376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BURNEY, MELISSA A
 Provider ID: 285890
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 530
 LA JOLLA, CA 92037-1213
 Phone: (760) 631-3000
 Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
 Provider Gender: Female
 License number: PA58612
 NPI: 1386260842
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BUSCHING, MICHELLE M

Provider ID: 124951
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858)
 657-7000
 Provider Gender: Female
 License number: PA54908
 NPI: 1720598808
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☞ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHERRY, REENA W

Provider ID: 243349
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: PA57026
 NPI: 1689729683
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CHERRY, REENA W

Provider ID: 269494
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: PA57026
 NPI: 1689729683
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

COOKISH, DAVID A

Provider ID: 286591
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: PA56764
 NPI: 1215338884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CRIFE, TAYLOR M

Provider ID: 210983
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA56367
 NPI: 1659827087
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DANESHVAR, ABRAHAM D
 Provider ID: 103064
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 499-1900
 Fax:
 After Hours Phone: (858) 499-1900
 Provider Gender: Male
 License number: PA52905
 NPI: 1245359140
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Turkish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DANESHVAR, ABRAHAM D
 Provider ID: 103064
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 9834 GENESEE AVE STE 312
 LA JOLLA, CA 92037-1221
 Phone: (858) 558-8150
 Fax: (858) 346-1024
 After Hours Phone: (858) 558-8150
 Provider Gender: Male
 License number: PA52905
 NPI: 1245359140
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Turkish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DEMASCO, MICHAEL A
 Provider ID: 278969

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PA56677
 NPI: 1467926295
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DEMOOR, PATRICIA A
 Provider ID: 212879
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA17504
 NPI: 1477721702
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DENEVAN, ANDREW J

Provider ID: 83353

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (858) 657-8235

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: PA23100

NPI: 1811324726

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DOUGHERTY, CLARA, NPA

Provider ID: 269170

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

9850 GENESEE AVE STE 440

LA JOLLA, CA 92037-1212

Phone: (858) 453-9944

Fax: (858) 429-7925

After Hours Phone: (858)

453-9944

Provider Gender: Female

License number: PA17439

NPI: 1609987619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DOUGHERTY, CLARA

Provider ID: 56019

Board Certified Specialty: No

GENESIS HEALTHCARE

PARTNERS PC

9850 GENESEE AVE STE 440

LA JOLLA, CA 92037-1212

Phone: (858) 453-5944

Fax:

After Hours Phone: (858)

453-5944

Provider Gender: Female

License number: PA17439

NPI: 1609987619

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GAIDADJIEV, TEODORA

Provider ID: 245349

Board Certified Specialty: No

UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR # 100

LA JOLLA, CA 92037-1701

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PA53021

NPI: 1235502162

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GUAY, MARY

Provider ID: 211971

Board Certified Specialty: No

UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA56513
NPI: 1790769008
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HALTER, KENNETH N

Provider ID: 102098
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2C
LA JOLLA, CA 92037-1300
Phone: (858) 657-6035
Fax:
After Hours Phone: (858)
657-6035
Provider Gender: Male
License number: PA22613
NPI: 1053745059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HARRIS, CHRISTINA V

Provider ID: 104661
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (858) 657-8235
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: PA51525
NPI: 1720053846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HASEGAWA, CHRIS

Provider ID: 247205
Board Certified Specialty: No
UCSD MEDICAL GROUP
8939 VILLA LA JOLLA DR STE
110
LA JOLLA, CA 92037-1732

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA56884
NPI: 1225698962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIGGINS, JOSHUA B

Provider ID: 287135
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 200
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA20471
NPI: 1861624181
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIGGINS, JOSHUA B

Provider ID: 287136
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA20471
NPI: 1861624181
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUNTER, JACOB A

Provider ID: 279334
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8910 VILLA LA JOLLA DR # 100
 LA JOLLA, CA 92037-1701

Phone: (800) 826-8273
Fax: (888) 539-8781
After Hours Phone: (800) 826-8273
Provider Gender: Male
License number: PA54452
NPI: 1114459765
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUNTER, JACOB A

Provider ID: 287450
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLA
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA54452
NPI: 1114459765
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LA COSTA, RACHEL

Provider ID: 256848
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA57139
NPI: 1831514322
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: 
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIN, JESSICA C

Provider ID: 110357
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: PA23003
NPI: 1437598695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIN, JOYCE

Provider ID: 265146
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 888-9268
Fax: (888) 539-8781
After Hours Phone: (800)
 888-9268
Provider Gender: Female
License number: PA57821
NPI: 1427681022
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Taiwanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
LIN, JOYCE
Provider ID: 265147
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 554-1212
Fax: (858) 554-1222
After Hours Phone: (858)
 554-1212
Provider Gender: Female
License number: PA57821
NPI: 1427681022
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Taiwanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUONG, TRAN H

Provider ID: 279014
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273

Provider Gender: Female
License number: PA54061
NPI: 1821532292
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LUONG, TRAN H

Provider ID: 279015
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: PA54061
NPI: 1821532292
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

MCADAMS, JOSEPH

Provider ID: 280612
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA58420
NPI: 1104371251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCAIN, JULIA A

Provider ID: 103168
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female

License number: PA52127
NPI: 1679805022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MERRILL, COREY M

Provider ID: 258039
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA56995
NPI: 1386032308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OKADA, MICHELLE R

Provider ID: 278016
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA58603
NPI: 1497129860
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OKADA, MICHELLE R

Provider ID: 278017
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA58603
NPI: 1497129860

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OROSCO, HEATHER R

Provider ID: 99616
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: PA23124
NPI: 1215139373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PERREAULT, MARK R

Provider ID: 283583
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA57736
NPI: 1356749451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERREAULT, MARK R

Provider ID: 283584
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA57736
NPI: 1356749451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SACKNOFF, STEFANIE S

Provider ID: 242084
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA51280
NPI: 1720418833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Ucsd Medical Group

SANCHEZ, MICHAEL R

Provider ID: 206907
Board Certified Specialty: No
 UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

8939 VILLA LA JOLLA DR STE 110
LA JOLLA, CA 92037-1732
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA55472
NPI: 1184135006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHWARTZEL, KEVIN N

Provider ID: 214276
Board Certified Specialty: No
UCSD MEDICAL GROUP
8910 VILLA LA JOLLA DR # 100
LA JOLLA, CA 92037-1701
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA53888
NPI: 1104277847
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAUL, SHERA M

Provider ID: 247975
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA56786
NPI: 1336659507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAUL, SHERA M

Provider ID: 247976
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8373
Fax:
After Hours Phone: (800) 926-8373
Provider Gender: Female
License number: PA56786
NPI: 1336659507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STALLINGS, ANDREA M

Provider ID: 101020
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: PA16540
NPI: 1972595478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUTTON, BRIAN C

Provider ID: 90352
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PA18573
NPI: 1629174727
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TESFAI, HELEN S

Provider ID: 277072
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PA54848
NPI: 1942724042
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TOLEDO, SILVA P

Provider ID: 115851
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-3115
Fax: (858) 822-6186
After Hours Phone: (858)
822-3115
Provider Gender: Female
License number: PA15199
NPI: 1063464022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TORNG, SHERRY S

Provider ID: 109646
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: PA52556
NPI: 1427439652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TRAUTMAN, AMY L

Provider ID: 104653
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8200
 Fax: (858) 657-8235
 After Hours Phone: (858) 657-8200
 Provider Gender: Female
 License number: PA51673
 NPI: 1235412503
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

UPTON, JACQUELINE M

Provider ID: 84939
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8200
 Fax: (858) 657-8235
 After Hours Phone: (858) 657-8200
 Provider Gender: Female
 License number: PA21933
 NPI: 1295704328
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA:
WEIR, JACQUELINE R
 Provider ID: 278202
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (800) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA21646
 NPI: 1932494499
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ZANZUCCHI, AUDREY E

Provider ID: 253254
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (619) 543-5540
 Fax:
 After Hours Phone: (619) 543-5540
 Provider Gender: Female
 License number: PA54479
 NPI: 1265960256
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ZANZUCCHI, AUDREY E

Provider ID: 253255
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 657-7876
 Fax:
 After Hours Phone: (858) 657-7876
 Provider Gender: Female
 License number: PA54479
 NPI: 1265960256
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Phone:</i> (619) 471-9186 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Male <i>License number:</i> C137976 <i>NPI:</i> 1396704698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	No ♿ <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
PULMONARY DISEASES		
AFSHAR, KAMYAR <i>Provider ID:</i> 102310 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 471-9186 <i>Fax:</i> (619) 543-8255 <i>After Hours Phone:</i> (619) 471-9186 <i>Provider Gender:</i> Male <i>License number:</i> 20A8875 <i>NPI:</i> 1407050669 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	CONRAD, DOUGLAS J <i>Provider ID:</i> 65150 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # 2B LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 249-2500 <i>Fax:</i> <i>After Hours Phone:</i> (858) 249-2500 <i>Provider Gender:</i> Male <i>License number:</i> G63104 <i>NPI:</i> 1780605378 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	CROUCH, DANIEL R <i>Provider ID:</i> 110338 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7105 <i>Fax:</i> (858) 657-7107 <i>After Hours Phone:</i> (858) 657-7105 <i>Provider Gender:</i> Male <i>License number:</i> A116727 <i>NPI:</i> 1710182423 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Temecula Valley Hospital Inc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
AKUTHOTA, PRAVEEN <i>Provider ID:</i> 102056 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	ELMARAACHLI, WAEL <i>Provider ID:</i> 83403 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-7000
 Fax: (858) 657-7107
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A106280
 NPI: 1366468969
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ELMARAACHLI, WAEL

Provider ID: 83404
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (858) 657-7107
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A106280
 NPI: 1366468969
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ELMARAACHLI, WAEL

Provider ID: 83407
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # C
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-2347
 Fax:
 After Hours Phone: (619) 543-2347
 Provider Gender: Male
 License number: A106280
 NPI: 1366468969
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

FERNANDES, TIMOTHY M

Provider ID: 83427
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax: (858) 657-7107
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A112514
 NPI: 1669680757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

FERNANDES, TIMOTHY M

Provider ID: 83428
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (858) 657-7107
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A112514
 NPI: 1669680757
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: IPA:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IBRAHIM, ISLAM M

Provider ID: 64920
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7125
Fax:
After Hours Phone: (858) 657-7125
Provider Gender: Male
License number: C54272
NPI: 1962586917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Long Beach Memorial Med Ctr, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
JOSHUA, JISHA K
Provider ID: 238060
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144956
NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KERR, KIM M

Provider ID: 63756
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7140
Fax: (858) 657-7107
After Hours Phone: (858) 657-7140
Provider Gender: Female
License number: G68491

NPI: 1982647392
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIM, HYONG S

Provider ID: 65213
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 1D
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7100
Fax: (858) 657-7107
After Hours Phone: (858) 657-7100
Provider Gender: Male
License number: A65876
NPI: 1598780066
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA:	NPI: 1619014479	Website:
LIANG, NI CHENG	Provider English Spoken: Yes	Email:
Provider ID: 83702	Provider Language(s) Spoken:	Medical Group(s):
Board Certified Specialty: No	Cultural Competency: No	IPA: Ucsd Medical Group
UCSD MEDICAL GROUP	Hospital Affiliation: Ucsd Medical	
9350 CAMPUS POINT DR	Ctr, Ucsd La Jolla John Sally	
LA JOLLA, CA 92037-1300	Thornton	
Phone: (619) 543-6886	Medi-Cal Open Panel: No	MAGANA, MARISA M
Fax:	Min/Max Age: None	Provider ID: 65243
After Hours Phone: (619)	American Sign Language (ASL):	Board Certified Specialty: No
543-6886	No	UCSD MEDICAL GROUP
Provider Gender: Female	Ⓜ Accessibility: W	9300 CAMPUS POINT DR
License number: A98510	Hours: M-F 8AM-5PM, SA	LA JOLLA, CA 92037-1300
NPI: 1760666945	9AM-5PM	Phone: (858) 657-7000
Provider English Spoken: Yes	Website:	Fax:
Provider Language(s) Spoken:	Email:	After Hours Phone: (858)
Mandarin, Spanish	Medical Group(s):	657-7000
Cultural Competency: No	IPA: Ucsd Medical Group	Provider Gender: Female
Hospital Affiliation: Ucsd Medical		License number: A94464
Ctr, Scripps Memorial Hospital	LI, JINGHONG	NPI: 1194856286
Encinitas	Provider ID: 83697	Provider English Spoken: Yes
Medi-Cal Open Panel: No	Board Certified Specialty: No	Provider Language(s) Spoken:
Min/Max Age: None	UCSD MEDICAL GROUP	Spanish
American Sign Language (ASL):	9434 MEDICAL CENTER DR FL	Cultural Competency: No
No	1	Hospital Affiliation: Scripps
Ⓜ Accessibility: W	LA JOLLA, CA 92037-1337	Memorial Hospital, Scripps
Hours: M-SA 9AM-5PM	Phone: (858) 657-7125	Memorial Hospital Encinitas,
Website:	Fax: (858) 657-7107	Ucsd Medical Ctr
Email:	After Hours Phone: (858)	Medi-Cal Open Panel: No
Medical Group(s):	657-7125	Min/Max Age: None
IPA:	Provider Gender: Female	American Sign Language (ASL):
	License number: A107000	No
	NPI: 1619014479	Ⓜ Accessibility: W
LI, JINGHONG	Provider English Spoken: Yes	Hours: M-F 8AM-5PM, SA
Provider ID: 83696	Provider Language(s) Spoken:	9AM-5PM
Board Certified Specialty: No	Cultural Competency: No	Website:
UCSD MEDICAL GROUP	Hospital Affiliation: Ucsd Medical	Email:
9300 CAMPUS POINT DR	Ctr, Ucsd La Jolla John Sally	Medical Group(s):
LA JOLLA, CA 92037-1300	Thornton	IPA:
Phone: (858) 657-7125	Medi-Cal Open Panel: No	
Fax: (858) 657-7107	Min/Max Age: None	MALHOTRA, ATUL
After Hours Phone: (858)	American Sign Language (ASL):	Provider ID: 83979
657-7125	No	Board Certified Specialty: No
Provider Gender: Female	Ⓜ Accessibility: W	UCSD MEDICAL GROUP
License number: A107000	Hours: M-SA 9AM-5PM	9300 CAMPUS POINT DR
		LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-6485 Fax: (858) 657-7107 After Hours Phone: (858) 657-6485 Provider Gender: Male License number: C55949 NPI: 1982695169 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: (619) 543-7352 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A101188 NPI: 1326168600 Provider English Spoken: Yes Provider Language(s) Spoken: French, Greek Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
OWENS, ROBERT L Provider ID: 110222 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-7105 Fax: (858) 657-7107 After Hours Phone: (858) 657-7105 Provider Gender: Male License number: C131174 NPI: 1972589265 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):	PAPAMATHEAKIS, DEMOSTHENES G Provider ID: 65272 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-6886 Fax: (619) 543-7352 After Hours Phone: (619) 543-6886 Provider Gender: Male License number: A101188 NPI: 1326168600 Provider English Spoken: Yes Provider Language(s) Spoken: French, Greek Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	POCH, DAVID S Provider ID: 65014 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-6303 Fax: (858) 657-7107 After Hours Phone: (619) 543-6303 Provider Gender: Male License number: A107956 NPI: 1598955668 Provider English Spoken: Yes Provider Language(s) Spoken:
PAPAMATHEAKIS, DEMOSTHENES G Provider ID: 65375 Board Certified Specialty: No	PAPAMATHEAKIS, DEMOSTHENES G Provider ID: 65375 Board Certified Specialty: No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

POCH, DAVID S

Provider ID: 65277
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8440
Fax: (858) 657-8723
After Hours Phone: (858) 657-8440
Provider Gender: Male
License number: A107956
NPI: 1598955668
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNWOO, BERNIE Y

Provider ID: 118883
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: A138242
NPI: 1336294107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW R

Provider ID: 243627
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Male
License number: A126549
NPI: 1790049591
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Ucsd Medical Group

MACEWAN, IAIN J

Provider ID: 205873
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-4048
Fax:
After Hours Phone: (858) 822-4048
Provider Gender: Male
License number: A129079
NPI: 1326300401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Rady Childrens Health Network, Ucsd Medical Group	<i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-4048 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-4048 <i>Provider Gender:</i> Male <i>License number:</i> A129079 <i>NPI:</i> 1326300401 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Uc Davis Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
MACEWAN, IAIN J <i>Provider ID:</i> 205874 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3800-3899 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-4048 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-4048 <i>Provider Gender:</i> Male <i>License number:</i> A129079 <i>NPI:</i> 1326300401 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Rady Childrens Health Network, Ucsd Medical Group	MAYADEV, JYOTI S , MD <i>Provider ID:</i> 269884 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (916) 734-8269 <i>Fax:</i> (858) 822-6080 <i>After Hours Phone:</i> (916) 734-8269 <i>Provider Gender:</i> Female <i>License number:</i> A109372 <i>NPI:</i> 1902906902 <i>Provider English Spoken:</i> Yes	MELL, LOREN K , MD <i>Provider ID:</i> 269944 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (619) 543-3405 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-3405 <i>Provider Gender:</i> Male <i>License number:</i> A104704 <i>NPI:</i> 1316119704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>
MACEWAN, IAIN J , MD <i>Provider ID:</i> 255729		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MURPHY, KEVIN T , MD

Provider ID: 269865
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6046

Fax:

After Hours Phone: (858)
822-6046

Provider Gender: Male

License number: A82350

NPI: 1730104167

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Medical Center, Sharp Memorial
Hospital, Ucsd Medical Ctr,
Palomar Health Downtown
Campus, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

ROSE, BRENT S , MD

Provider ID: 269874

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (619) 341-3899

Fax:

After Hours Phone: (619)
341-3899

Provider Gender: Male

License number: A142735

NPI: 1518250869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SANGHVI, PARAG R , MD

Provider ID: 270038

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (619) 230-0400

Fax:

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

SANGHVI, PARAG R

Provider ID: 64475

Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6100

Fax: (760) 738-7576

After Hours Phone: (858)
822-6100

Provider Gender: Male

License number: A105184

NPI: 1801005152

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd, Rady Childrens
Health Network

SHARABI, ANDREW B , MD

Provider ID: 269862

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (619) 543-1899

Fax:

After Hours Phone: (619)
543-1899

Provider Gender: Male

License number: A136977

NPI: 1043531213

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SIMPSON, DANIEL R , MD

Provider ID: 269852

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6040

Fax: (858) 822-6080

After Hours Phone: (858)
822-6040

Provider Gender: Male

License number: A118377

NPI: 1689974883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R

Provider ID: 125990

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)
622-6464

Provider Gender: Male

License number: A69840

NPI: 1215982970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268361

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (866) 558-4329

After Hours Phone: (858)
622-6464

Provider Gender: Male

License number: A69840

NPI: 1215982970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125984
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax:
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARYAFAR, HAMED

Provider ID: 64801
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A99187
NPI: 1093963605
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAHADOR, FARSHAD M

Provider ID: 104325
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A129414
NPI: 1730316928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

Provider ID: 125993
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
4150 REGENTS PARK ROW STE 195
LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BERGMAN, ERIK W

Provider ID: 125003

Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)
657-6641

Provider Gender: Male

License number: C153284

NPI: 1043291073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BORSO, MAYA G

Provider ID: 126006

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)
622-6464

Provider Gender: Female

License number: A97134

NPI: 1548473507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BRADLEY, WILLIAM R

Provider ID: 271434

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A167142

NPI: 1780066803

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr, Scripps Green

Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BROUHA, SHARON S

Provider ID: 64827

Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A91973

NPI: 1356554323

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BUCKLEY, DAVID W

Provider ID: 243265
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUI, KEVIN T

Provider ID: 280519
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A134576

NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASOLA, GIOVANNA

Provider ID: 64835
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Saddleback Memorial Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA

9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, ERIC Y

Provider ID: 64839
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A97139
NPI: 1376756353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, JAMES Y

Provider ID: 64416
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Male
 License number: A108635
 NPI: 1427250588
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHEN, JAMES Y

Provider ID: 64842
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A108635
 NPI: 1427250588
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHEN, KAREN C

Provider ID: 64843
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A110719
 NPI: 1437377710
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHOU, ERIC T

Provider ID: 126016
 Board Certified Specialty: No

IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax: (858) 622-6460
 After Hours Phone: (858) 622-6464
 Provider Gender: Male
 License number: A96095
 NPI: 1689627838
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHUNG, CHRISTINE B

Provider ID: 64848
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A65414
 NPI: 1528033560
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COOPER, JAMES A

Provider ID: 126041
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical

Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DE GUZMAN, JADE Q

Provider ID: 64423
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Ronald Reagan Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DE GUZMAN, JADE Q

Provider ID: 64856
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Ronald Reagan Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOEMENY, JOHN M

Provider ID: 126048
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DORROS, STEPHEN M

Provider ID: 64861
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G29061
NPI: 1942319959
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DWEK, JERRY R

Provider ID: 64866
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G86073
NPI: 1558335695
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Ucsd La Jolla John Sally Thornton, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego, Palomar Medical Center, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EGHTEDARI, MOHAMMAD

Provider ID: 110349
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A114372
NPI: 1740548734
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 64871
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G76577
NPI: 1790751188
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FARID, NIKDOKHT

Provider ID: 64875
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A94195
NPI: 1205151172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W

Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIROOZANIA, NILOFAR

Provider ID: 126170
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax:
After Hours Phone: (858) 622-6464
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLISZAR, EVELYNE

Provider ID: 64877
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: A60712
NPI: 1164449955
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FORCIER, NANCY J

Provider ID: 286955
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: G72420
 NPI: 1497721724
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital, Providence
 Mission Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

FOWLER, KATHRYN J

Provider ID: 201290
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: C154877
 NPI: 1255457941
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

FRANKE, MARK A
 Provider ID: 126054
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL
 GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax:
 After Hours Phone: (858)
 622-6464
 Provider Gender: Male
 License number: A118792
 NPI: 1114246329
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica
 UCLA Med Ctr, Ronald Reagan
 UCLA Med Ctr, Alvarado Hospital
 Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FRIEND, CHRISTOPHER J

Provider ID: 120848
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858)
 657-7000
 Provider Gender: Male
 License number: C141231
 NPI: 1861491516
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

FRIEND, CHRISTOPHER J

Provider ID: 120855
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA
 JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-6641
 Fax:
 After Hours Phone: (858)
 657-6641
 Provider Gender: Male
 License number: C141231
 NPI: 1861491516
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GENTILI, AMILCARE

Provider ID: 64882
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A44208
NPI: 1922086594
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
GRISSOM, MURRAY J
Provider ID: 271568
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A147782
NPI: 1720465396
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAHN, MICHAEL E

Provider ID: 98503
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A119409

NPI: 1356573992
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANDWERKER, JASON

Provider ID: 98759
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A114704
NPI: 1316166630
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA

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D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HANSEN, ROBERT B

Provider ID: 113853

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-3405

Fax:

After Hours Phone: (619)

543-3405

Provider Gender: Male

License number: A97152

NPI: 1972643906

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: George L

Mee Memorial Hosp, Ucsd

Medical Ctr, Ucsd La Jolla John

Sally Thornton, Dameron

Hospital Assoc, St Josephs Med

Center Of Stockton, Memorial

Hospital Med Ctr, John C

Fremont Hospital, Mountains

Community Hosp, Lodi Memorial

Hospital, Oak Valley Dist Hosp

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HARMAN, SCOTT A

Provider ID: 126067

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

4150 REGENTS PARK ROW

STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: G57284

NPI: 1124071311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HAUSCHILDT, JOHN P

Provider ID: 64902

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: G76429

NPI: 1922072099

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Sharp

Memorial Hospital, Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HILLER, LUCAS P

Provider ID: 64907

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A91321

NPI: 1417160474

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Green Hospital,

Ucsd La Jolla John Sally

Thornton, Scripps Memorial

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Encinitas

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HSIAO, ALBERT

Provider ID: 117381
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-6641
 Fax: (858) 657-6686
 After Hours Phone: (858) 657-6641
 Provider Gender: Male
 License number: A105882
 NPI: 1457546244
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HUANG, BRADY K

Provider ID: 64916

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A108832
 NPI: 1407860299
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HUGHES, TUDOR H

Provider ID: 64918
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A83748
 NPI: 1932187127
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

IMBESI, STEVEN G

Provider ID: 64923
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: G79078
 NPI: 1891710554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

ISHIOKA, KEVIN M

Provider ID: 83631

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: A93286

NPI: 1437362498

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Mercy Hospital,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Scripps

Green Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JOHNSON, JOHN O

Provider ID: 126079

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

4150 REGENTS PARK ROW

STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: G59632

NPI: 1073565792

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KARIMI, AFSHIN

Provider ID: 64934

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: A96518

NPI: 1952511214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Persian

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Pioneers

Memorial Hospital, Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, University Of California

Irvine Med Ctr, Ucsd Medical Ctr,

Ucsd La Jolla John Sally

Thornton, Temecula Valley

Hospital Inc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAROW, DAVID S

Provider ID: 64439

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: A96935

NPI: 1932490703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Santa Monica

Ucla Med Ctr, Ucsd Medical Ctr,

Ronald Reagan Ucla Med Ctr,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 <i>Phone:</i> (858) 822-6173 <i>Fax:</i> <i>After Hours Phone:</i> (858) 822-6173 <i>Provider Gender:</i> Male <i>License number:</i> C54827 <i>NPI:</i> 1568572832 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
KAROW, DAVID S <i>Provider ID:</i> 64935 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A96935 <i>NPI:</i> 1932490703 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	KHANNA, PARITOSH <i>Provider ID:</i> 64938 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> C54827 <i>NPI:</i> 1568572832 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical	KIKOLSKI, STEVEN G <i>Provider ID:</i> 64939 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A106307 <i>NPI:</i> 1063647485 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:

Email:

Medical Group(s):

IPA:

KINNEY, THOMAS B

Provider ID: 64941

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: G64176

NPI: 1992732671

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KINNE, ERICA L

Provider ID: 83294

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A110179

NPI: 1487803946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Loma Linda University Med

Ctr, Scripps Memorial Hospital,

Scripps Mercy Hospital, Ucsd La

Jolla John Sally Thornton,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Encinitas, Scripps Green

Hospital, Loma Linda University

Childrens Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KRUK, PETER G

Provider ID: 64948

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A96070

NPI: 1366480634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Sharp

Coronado Hosp And Healthcare

Ctr, Rady Childrens Hospital San

Diego, Grossmont Hospital,

Sharp Memorial Hospital, Ucsd

Medical Ctr, Sharp Chula Vista

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LADD, WILLIAM A

Provider ID: 64949

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: G63024

NPI: 1063463230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LECOMTE, MATTHEW D

Provider ID: 283488
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A171824
NPI: 1508210683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEE, ROLAND R

Provider ID: 64954
Board Certified Specialty: No
 UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G57800
NPI: 1639190028
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIM, VIVIAN

Provider ID: 125929
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Female
License number: G58509
NPI: 1295796753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIZERBRAM, ERIC K

Provider ID: 126092
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G74959
NPI: 1598718926
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> LUBISICH, JOHN P <i>Provider ID:</i> 126098 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> (858) 622-6460 <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> G77575 <i>NPI:</i> 1194863902 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc MAFEE, MAHMOOD F <i>Provider ID:</i> 64965 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300	<i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A31751 <i>NPI:</i> 1356431373 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> MAREK BYKOWSKI, JULIE L <i>Provider ID:</i> 64969 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female <i>License number:</i> A96803 <i>NPI:</i> 1699988667 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr	<i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> MEISINGER, QUINN C <i>Provider ID:</i> 117245 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-6641 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-6641 <i>Provider Gender:</i> Male <i>License number:</i> A123683 <i>NPI:</i> 1215222757 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🗎 <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> MEISINGER, QUINN C <i>Provider ID:</i> 118375
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: A123683
NPI: 1215222757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MISRA, CHANDAN
Provider ID: 118480
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: A146108
NPI: 1821356825
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOFFIT, BRIAN J
Provider ID: 126119
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MURPHY, PAUL M
Provider ID: 118360
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Male
License number: A123586
NPI: 1295050946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Santa Monica Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAHEEDY, JOHN H
Provider ID: 64461
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Male
 License number: A99832
 NPI: 1760695761
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NAHEEDY, JOHN H

Provider ID: 64991
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A99832
 NPI: 1760695761
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare

Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NEWTON, ISABEL G

Provider ID: 84301
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Female
 License number: A108128
 NPI: 1306068697
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NEWTON, ISABEL G

Provider ID: 84302
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6173
 Fax:
 After Hours Phone: (858) 822-6173
 Provider Gender: Female
 License number: A108128
 NPI: 1306068697
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NORBASH, ALEXANDER M

Provider ID: 125637
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-6641
 Fax:
 After Hours Phone: (858) 657-6641
 Provider Gender: Male
 License number: G62865

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1790752269
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OBOYLE, MARY K

Provider ID: 64998
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G73501
 NPI: 1568487999
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA:
OBRZUT, SEBASTIAN
 Provider ID: 64999
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000
 Provider Gender: Male
 License number: A85028
 NPI: 1083714398
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OJEDA-FOURNIER, HAYDEE

Provider ID: 65000
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 Fax:
 After Hours Phone: (858) 657-7000

Provider Gender: Female
 License number: A99462
 NPI: 1871537191
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OLOUGHLIN, BRIAN J

Provider ID: 126125
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
 Phone: (858) 622-6464
 Fax:
 After Hours Phone: (858) 622-6464
 Provider Gender: Male
 License number: A120064
 NPI: 1972709087
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 126131

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (858) 622-6460

After Hours Phone: (858)
622-6464

Provider Gender: Female

License number: G48800

NPI: 1285685925

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PAKBAZ, RAMIN S

Provider ID: 64463

Board Certified Specialty: No

UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (858) 822-6173

Fax:

After Hours Phone: (858)

822-6173

Provider Gender: Male

License number: A73947

NPI: 1811072457

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi

Cultural Competency: No

Hospital Affiliation: Sutter
Roseville Medical Center, Mercy
General Hospital, Mercy San
Juan Hospital, Scripps Green

Hospital, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital

Encinitas, Ucsd Medical Ctr,

Paradise Valley Hospital, Scripps
Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PAKBAZ, RAMIN S

Provider ID: 65005

Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)
657-7000

Provider Gender: Male

License number: A73947

NPI: 1811072457

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi

Cultural Competency: No

Hospital Affiliation: Sutter
Roseville Medical Center, Mercy
General Hospital, Mercy San
Juan Hospital, Scripps Green

Hospital, Scripps Memorial
Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital

Encinitas, Ucsd Medical Ctr,

Paradise Valley Hospital, Scripps
Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PATHRIA, MINI N

Provider ID: 65011

Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: A43771

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1699739318 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-6641 Fax: (858) 657-6686 After Hours Phone: (858) 657-6641 Provider Gender: Male License number: G18577 NPI: 1164450938 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:
PATIL, AMOL A Provider ID: 98854 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000 Provider Gender: Male License number: A133973 NPI: 1225355720 Provider English Spoken: Yes Provider Language(s) Spoken: French, Hindi Cultural Competency: No Hospital Affiliation: Sierra Vista Regional Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Goleta Valley Cottage Hosp Medi-Cal Open Panel: No Min/Max Age: None	PRETORIUS, DOLORES H Provider ID: 65018 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000 Provider Gender: Female License number: C39102 NPI: 1902839418 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	RIAD, SHAREEF M Provider ID: 65027 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-3405 Fax: After Hours Phone: (619) 543-3405 Provider Gender: Male License number: A106536 NPI: 1417111477 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Doctors
RESNICK, DONALD L Provider ID: 65026 Board Certified Specialty: No UCSD MEDICAL GROUP		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Center, West Hills
Hospital Medical Center, Salinas
Valley Memorial Hosp, Riverside
Community Hosp, Parkview
Community Hospital Medical
Center, St Bernardine Med Ctr,
Community Hosp Of San
Bernardino, Kindred Hospital
Ontario, Ucsd La Jolla John Sally
Thornton, Dameron Hospital
Assoc

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RICHMAN, KATHERINE M

Provider ID: 65028
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: G80333
NPI: 1992898993
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTS, ANNE C

Provider ID: 65032
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: G58654
NPI: 1669497996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROMINE, LORENE E

Provider ID: 65033
Board Certified Specialty: No
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Female
License number: A87658
NPI: 1720209786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Cedars Sinai Medical
Center, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAMPATH, SRINATH C

Provider ID: 110180
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858)
657-6641
Provider Gender: Male
License number: A108197
NPI: 1891982328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tamil
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 65043
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A90879
NPI: 1932132404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHECHTER, MARK S

Provider ID: 126137
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G42390
NPI: 1942253018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZBERG, ROSS E

Provider ID: 126144
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139

Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SIRLIN, CLAUDE B

Provider ID: 65061
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Saddleback Memorial Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

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D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> (866) 558-4329 <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> A65059 <i>NPI:</i> 1477505162 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
SLATER, JERRY <i>Provider ID:</i> 283311 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A172254 <i>NPI:</i> 1851746382 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	SPOTO, GARY P <i>Provider ID:</i> 126157 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> (858) 622-6460 <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> G58131 <i>NPI:</i> 1659332062 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy	STANFILL, JOHN G <i>Provider ID:</i> 84902 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A124808 <i>NPI:</i> 1831364330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA
SNYDER, WILLIAM C <i>Provider ID:</i> 126151 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC	SPOTO, GARY P <i>Provider ID:</i> 126157 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 4150 REGENTS PARK ROW STE 195 LA JOLLA, CA 92037-9139 <i>Phone:</i> (858) 622-6464 <i>Fax:</i> (858) 622-6460 <i>After Hours Phone:</i> (858) 622-6464 <i>Provider Gender:</i> Male <i>License number:</i> G58131 <i>NPI:</i> 1659332062 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy	STANFILL, JOHN G <i>Provider ID:</i> 84902 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> A124808 <i>NPI:</i> 1831364330 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA

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D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TADROS, ANTHONY S

Provider ID: 116033

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A128627

NPI: 1306112057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TADROS, ANTHONY S

Provider ID: 268545

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A128627

NPI: 1306112057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TAMAYO-MURILLO, DORATHY E

Provider ID: 126828

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)

657-6641

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAMAYO-MURILLO, DORATHY E

Provider ID: 126832

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6641

Fax:

After Hours Phone: (858)

657-6641

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TENA, ROWENA G

Provider ID: 126163

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126216
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male

License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TSUKADA, GLENN H

Provider ID: 126201
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A60235
NPI: 1710938394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Alvarado Hospital Llc, Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps

Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TYAGI, AVISHKAR

Provider ID: 84936
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A123065
NPI: 1740440148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, San Dimas Community Hospital, Lakewood Regional Med Ctr, Pacific Alliance Medical Center, San Antonio Comm Hosp, Tri City Medical Ctr, Palomar Health Downtown Campus, Pomerado Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website: Email: Medical Group(s): IPA: VINOCUR, DANIEL N Provider ID: 64484 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 822-6173 Fax: After Hours Phone: (858) 822-6173 Provider Gender: Male License number: A115727 NPI: 1770711830 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: VINOCUR, DANIEL N Provider ID: 65086 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000	Provider Gender: Male License number: A115727 NPI: 1770711830 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: WAGNER, THAO N Provider ID: 84946 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000 Provider Gender: Female License number: A123521 NPI: 1821067935 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green	Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: WANG, LEE L Provider ID: 118161 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-6641 Fax: After Hours Phone: (858) 657-6641 Provider Gender: Male License number: A146921 NPI: 1003119975 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

WEIHE, ELIZABETH

Provider ID: 102369
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6641
Fax:
After Hours Phone: (858) 657-6641
Provider Gender: Female
License number: A135679
NPI: 1386884302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YEN, ANDREW C

Provider ID: 65094
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A89413
NPI: 1942499116

Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZAKHARY, MINA M

Provider ID: 84249
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A124821
NPI: 1114185626
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Hebrew
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Green Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 126194
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (858) 622-6460
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

Provider Gender: Female

License number: A144517

NPI: 1427430511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RADIOLOGY DIAGNOSTIC

BECKETT, RYAN D

Provider ID: 283217

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A172431

NPI: 1932561347

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHENG, KAREN Y

Provider ID: 283227

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

COVELL, DUSTIN M

Provider ID: 239901

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A160221

NPI: 1942615893

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

EAJAZI, ALIREZA

Provider ID: 283522

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A171288

NPI: 1669835005

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MORENO, MARIO A

Provider ID: 283316

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A151572
NPI: 1871957308
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHULTZ, HEATHER M

Provider ID: 240343
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A139567
NPI: 1871910810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YORK, VINCENT M

Provider ID: 283518
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170712
NPI: 1790146611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RADIOLOGY

DOEMENY, JOHN M

Provider ID: 269748
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269633
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4150 REGENTS PARK ROW
 STE 195
 LA JOLLA, CA 92037-9139
Phone: (858) 622-6464
Fax: (866) 558-4329
After Hours Phone: (858) 622-6464
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269527

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (866) 558-4329

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245630

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax:

After Hours Phone: (858)

622-6464

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269826

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4150 REGENTS PARK ROW
STE 195

LA JOLLA, CA 92037-9139

Phone: (858) 622-6464

Fax: (866) 558-4329

After Hours Phone: (858)

622-6464

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REGISTERED DIETITIAN / NUTRITIONIST

ROBERTS, TRACI L

Provider ID: 268237

Board Certified Specialty: No
UCSD MEDICAL GROUP
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037-1208

Phone: (858) 864-9800

Fax:

After Hours Phone: (858)

864-9800

Provider Gender: Female

License number: 86084895

NPI: 1003385691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ROBERTS, TRACI L

Provider ID: 268238
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858)
 822-6100
 Provider Gender: Female
 License number: 86084895
 NPI: 1003385691
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ROBERTS, TRACI L

Provider ID: 268239
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: 86084895
 NPI: 1003385691
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SIEVERING, DENISE

Provider ID: 268249
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: 86061948
 NPI: 1356478929
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

REGISTERED PHYSICAL THERAPIST

BECHERER, KELLEY D

Provider ID: 118456
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (855) 543-0333
 Fax:
 After Hours Phone: (855)
 543-0333
 Provider Gender: Female
 License number: PT43240
 NPI: 1306219472
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Ucsd Medical Group

BECHERER, KELLEY D

Provider ID: 258297
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT43240
 NPI: 1306219472
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Ucsd Medical Group

BERGERON, PATRICK R
 Provider ID: 206533
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PT41083
 NPI: 1285061390
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BERGERON, PATRICK R
 Provider ID: 258296
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PT41083
 NPI: 1285061390
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BUNOSKY, ABIGAIL S
 Provider ID: 246021
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Female
 License number: PT40519
 NPI: 1780018416
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BURGESS, CATHERINE E
 Provider ID: 258346
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # LLD
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT35850
 NPI: 1205287687
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

CHIEN, PEI S

Provider ID: 214699

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT295605

NPI: 1891260238

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHIEN, PEI S

Provider ID: 258324

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT295605

NPI: 1891260238

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HERMAS, LAUREN D

Provider ID: 258316

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)

657-6879

Provider Gender: Female

License number: PT22469

NPI: 1376856153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HOOPER, JASON K

Provider ID: 258357

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (858) 657-6590

Fax: (858) 657-1809

After Hours Phone: (858)

657-6590

Provider Gender: Male

License number: PT43019

NPI: 1699158022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KIERNAN, KRISTEN

Provider ID: 258358

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)

657-6879

Provider Gender: Female

License number: PT292711

NPI: 1215216379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group LE, YVONNE T Provider ID: 202665 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: PT295301 NPI: 1942780424 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group LE, YVONNE T Provider ID: 258444 Board Certified Specialty: No	UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # LLD LA JOLLA, CA 92037-1300 Phone: (858) 657-6879 Fax: (858) 657-6873 After Hours Phone: (858) 657-6879 Provider Gender: Female License number: PT295301 NPI: 1942780424 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group MAROLLA, ALICE R Provider ID: 241145 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # LLD LA JOLLA, CA 92037-1300 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: PT296117 NPI: 1477018729 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical	Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group MITCHELL, JEFFREY A Provider ID: 84286 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (858) 657-6879 Fax: (858) 657-6873 After Hours Phone: (858) 657-6879 Provider Gender: Male License number: PT37484 NPI: 1497827638 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: MOELLER, LISA K Provider ID: 258404
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
License number: PT18807
NPI: 1033664677
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
🚫 *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NALBANDIAN, SARAH

Provider ID: 210312
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax: (858) 857-1809
After Hours Phone: (855) 543-0333
Provider Gender: Female
License number: PT295291
NPI: 1871069922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
🚫 *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 129198
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
🚫 *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 202327

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
🚫 *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 258431
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OBISPO MCQUERRY, MICHELLE A

Provider ID: 258380
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858)
657-6879
Provider Gender: Female
License number: PT38043
NPI: 1962769075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUDD, CHRISTOPHER D

Provider ID: 207559

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT291997
NPI: 1831539337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUDD, CHRISTOPHER D

Provider ID: 258372
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: PT291997
NPI: 1831539337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANO, NISHIKI

Provider ID: 276719
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT296276
NPI: 1497399091
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SKINNER, NICOLE J

Provider ID: 206546

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: PT18043
NPI: 1386964997
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 122382
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax:
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: PT293496
NPI: 1740708478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 258442
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: PT293496
NPI: 1740708478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIMM, CASSIDY M

Provider ID: 258443

Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: PT293496
NPI: 1740708478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 128896
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: PT294934
NPI: 1568938413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 200968

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT294934

NPI: 1568938413

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VASQUEZ, BENJAMIN P

Provider ID: 258480

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)

657-6879

Provider Gender: Male

License number: PT294934

NPI: 1568938413

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 258496

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLD

LA JOLLA, CA 92037-1300

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)

657-6879

Provider Gender: Female

License number: PT37862

NPI: 1689962169

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

YU, AUDRINE A

Provider ID: 128619

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: PT295026

NPI: 1639271208

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

YU, AUDRINE A

Provider ID: 258481

Board Certified Specialty: No

UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
License number: PT295026
NPI: 1639271208
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RHEUMATOLOGY

CEPONIS, ARNOLDAS
Provider ID: 65137
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B
LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: A106525
NPI: 1144423039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CORR, MARY P
Provider ID: 64854
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: G61357
NPI: 1255389417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIRESTEIN, GARY S
Provider ID: 65169
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300
Phone: (858) 249-2500
Fax:
After Hours Phone: (858) 249-2500
Provider Gender: Male
License number: G46824
NPI: 1699790808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GINSBERG, MARK H
Provider ID: 64885
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: G29521
NPI: 1659396778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HEPBURN, BONNIE

Provider ID: 100920

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # LLB (0912

LA JOLLA, CA 92037-1300

Phone: (858) 657-8440

Fax:

After Hours Phone: (858)

657-8440

Provider Gender: Female

License number: G83568

NPI: 1104972850

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAVANAUGH, ARTHUR F

Provider ID: 65210

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR # 2B

LA JOLLA, CA 92037-1300

Phone: (858) 249-2500

Fax:

After Hours Phone: (858)

249-2500

Provider Gender: Male

License number: C50307

NPI: 1679584486

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LEE, SUSAN J

Provider ID: 65230

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-6110

Fax: (858) 657-6191

After Hours Phone: (858)

657-6110

Provider Gender: Female

License number: A67596

NPI: 1386677045

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MIDDLETON, GREGORY D

Provider ID: 124158

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: C54037

NPI: 1104891290

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MIDDLETON, GREGORY D

Provider ID: 65252

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-2347

Fax:

After Hours Phone: (619)

543-2347

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: C54037
NPI: 1104891290
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SINGH, ABHA

Provider ID: 102136
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-6110
Fax:
After Hours Phone: (858) 657-6110
Provider Gender: Female
License number: A136137
NPI: 1710144423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

SPEECH PATHOLOGIST

DOCKTER, ANDI M

Provider ID: 248062
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLA
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Female
License number: SP26061
NPI: 1073150801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248064
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Female
License number: SP26061

NPI: 1073150801
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KERR, LAUREN S

Provider ID: 285970
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR # LLD
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: SP31784
NPI: 1164929287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

LINNEMEYER, KRISTEN E

Provider ID: 83703
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
License number: SP21053
NPI: 1013070085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHAEFER, LINDSEY A

Provider ID: 286312
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: SP17349
NPI: 1598200719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

UNGER, LINDSEY A

Provider ID: 265338
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: SP20362
NPI: 1972936813
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Sign Language
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY CARDIOVASCULAR

BOYS, JOSHUA A

Provider ID: 243533
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7777
Fax:
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: A125954
NPI: 1114368990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COLETTA, JOELLE M

Provider ID: 210528
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-7777
Fax:
After Hours Phone: (619) 543-7777
Provider Gender: Female
License number: A55001

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D. Directorio de proveedores de atención especializada

NPI: 1447222377 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group	Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group	Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 543-7777 Fax: After Hours Phone: (619) 543-7777 Provider Gender: Male License number: A67201 NPI: 1518999069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group
GOLTS, EUGENE M Provider ID: 210077 Board Certified Specialty: No UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A82530 NPI: 1316000649 Provider English Spoken: Yes Provider Language(s) Spoken: Ukrainian Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally	GRAMINS, DANIEL L Provider ID: 210047 Board Certified Specialty: Yes UCSD MEDICAL GROUP 9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037-1337 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: G79711 NPI: 1164495750 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	ONAITIS, MARK Provider ID: 210296 Board Certified Specialty: No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503 Phone: (858) 657-7777 Fax: (858) 657-5058 After Hours Phone: (858) 657-7777 Provider Gender: Male License number: C144886 NPI: 1841310638
MADANI, MICHAEL M Provider ID: 210286		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONAITIS, MARK

Provider ID: 210297
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR # 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-7777
Fax: (858) 657-5058
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: C144886
NPI: 1841310638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
POLLEMA, TRAVIS L
Provider ID: 210576
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12742
NPI: 1871752956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 210571
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: A113774

NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 210505
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-7777
Fax:
After Hours Phone: (619) 543-7777
Provider Gender: Female
License number: G84093
NPI: 1831121789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A128073
 NPI: 1043558653
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL G
 Provider ID: 110352
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 657-7237
 Fax: (858) 228-1731
 After Hours Phone: (858) 657-7237
 Provider Gender: Male
 License number: A132251
 NPI: 1194983932
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, University Hsp Of San Diego Co
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LOPEZ, NICOLE E
 Provider ID: 286388
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Female
 License number: A107945
 NPI: 1518163005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

PARRY, LISA A
 Provider ID: 278551
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A131297
 NPI: 1235369067
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LIU, SHANGLEI
 Provider ID: 273364
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

RAMAMOORTHY, SONIA L
 Provider ID: 286371
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A65709
NPI: 1801812656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA M
Provider ID: 284408
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A169184
NPI: 1144616541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HIGGINSON, SARA M
Provider ID: 243003
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A123464
NPI: 1578852471

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POTENZA, BRUCE M
Provider ID: 277299
Board Certified Specialty: No

UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-7200
Fax:
After Hours Phone: (619) 543-7200
Provider Gender: Male
License number: G77333
NPI: 1548281496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TADLOCK, MATTHEW D
Provider ID: 272849
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C54740
NPI: 1881666956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

VENTRO, GEORGE J

Provider ID: 284419
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A169299
 NPI: 1548604648
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WEAVER, JESSICA L

Provider ID: 243240
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A163176
 NPI: 1396044657
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SURGERY GENERAL VASCULAR

BANDYK, DENNIS F

Provider ID: 275339
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G89003
 NPI: 1649282039
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275340
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G89003
 NPI: 1649282039
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275341

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (888) 926-8273
Fax:
After Hours Phone: (888) 926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R
Provider ID: 275371
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R
Provider ID: 275373
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOWE, STEVEN C
Provider ID: 206760
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
Phone: (858) 657-7777
Fax: (858) 657-5058
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: G79076
NPI: 1497702740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical

Provider ID: 287012
Board Certified Specialty: No
UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A175295
NPI: 1316232010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GAFFEY, ANN C

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Ucsd La Jolla John Sally
Thornton, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LANE, JOHN S

Provider ID: 83682
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G81602
NPI: 1043390172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, University Of California Irvine
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211904
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A16931
NPI: 1770742264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

AL-NOURI, OMAR

Provider ID: 211905
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: 20A16931
NPI: 1770742264

Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ARMANI, AVA

Provider ID: 118845
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At
Ucsf, Ucsf Medical Center At
Mission Bay, Ucsf Medical
Center At Mount Zion, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ARMANI, AVA

Provider ID: 282142
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At
Ucsf, Ucsf Medical Center At
Mission Bay, Ucsf Medical
Center At Mount Zion, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 65120
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 65370
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 83206
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL
1
LA JOLLA, CA 92037-1337
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAUMGARTNER, JOEL M

Provider ID: 64407
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 534-4813
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: A121105
NPI: 1679629257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLAIR, SARAH L

Provider ID: 64410
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: G85042
NPI: 1710918008
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOUVET, MICHAEL

Provider ID: 64412
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6191
Fax:
After Hours Phone: (858) 822-6191
Provider Gender: Male
License number: G69035
NPI: 1033177803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CLARY, BRYAN M

Provider ID: 202568
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G134895
NPI: 1982787131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COIMBRA, RAUL S

Provider ID: 64851
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858) 657-7000
Provider Gender: Male
License number: A74573
NPI: 1356372791
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:	HORGAN, SANTIAGO Provider ID: 286380 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 471-0755 Fax: After Hours Phone: (619) 471-0755 Provider Gender: Male License number: F11 NPI: 1932297231 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
GOLTS, EUGENE M Provider ID: 65177 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR # LLB (0912 LA JOLLA, CA 92037-1300 Phone: (858) 657-8440 Fax: After Hours Phone: (858) 657-8440 Provider Gender: Male License number: A82530 NPI: 1316000649 Provider English Spoken: Yes Provider Language(s) Spoken: Ukrainian Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group	HORGAN, SANTIAGO Provider ID: 64912 Board Certified Specialty: No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 471-0701 Fax: (619) 543-3763 After Hours Phone: (619) 471-0701 Provider Gender: Male License number: F11 NPI: 1932297231	HORGAN, SANTIAGO Provider ID: 65193 Board Certified Specialty: No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 Phone: (619) 471-0701 Fax: (619) 543-7480 After Hours Phone: (619) 471-0701 Provider Gender: Male License number: F11 NPI: 1932297231 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 201728
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 471-0755
Fax:
After Hours Phone: (619)
471-0755
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 65200
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886

Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELLY, KAITLYN J

Provider ID: 83648
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 312-7010
After Hours Phone: (858)
822-6100
Provider Gender: Female
License number: A124613
NPI: 1124272430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOWY, ANDREW M

Provider ID: 64448
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax: (858) 822-6192
After Hours Phone: (858)
822-6100
Provider Gender: Male
License number: G87988
NPI: 1346218179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MADANI, MICHAEL M

Provider ID: 64963
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A67201
NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

MEKEEL, KRISTIN L

Provider ID: 65246
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
 543-6886
Provider Gender: Female
License number: C54096
NPI: 1104861947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MICHELOTTI, MARCOS J

Provider ID: 65251
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
 657-8200
Provider Gender: Male
License number: A107144
NPI: 1275711590
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation: Loma Linda
 University Childrens Hospital,
 Loma Linda University Med Ctr,
 Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OWENS, ERIK L

Provider ID: 65003

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Male
License number: G84727
NPI: 1578506523
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARRY, LISA A

Provider ID: 110404
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAMAMOORTHY, SONIA L

Provider ID: 65022
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
 657-7000
Provider Gender: Female
License number: A65709
NPI: 1801812656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RASCHKE, ERIC T

Provider ID: 270298
Board Certified Specialty: No

UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: 20A17495
NPI: 1316386659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANTORELLI, JARRETT E

Provider ID: 272304
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A161482
NPI: 1033529201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEDRAK, MICHAEL F

Provider ID: 84776
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 471-0701
Fax:
After Hours Phone: (619)
 471-0701
Provider Gender: Male
License number: A82582
NPI: 1750464111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SICKLICK, JASON K

Provider ID: 64480
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LA JOLLA, CA 92093-1503
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Male
License number: A112500
NPI: 1487700779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VEERAPONG, JULA
Provider ID: 119378
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6173
Fax:
After Hours Phone: (858) 822-6173
Provider Gender: Female
License number: C149942
NPI: 1801039490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WALLACE, ANNE M
Provider ID: 65087
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 294-3746
Fax:
After Hours Phone: (619) 294-3746
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WALLACE, ANNE M
Provider ID: 65318
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WHITE, REBEKAH R
Provider ID: 110739
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-2124
Fax:
After Hours Phone: (858) 822-2124
Provider Gender: Female
License number: C143450
NPI: 1750400784
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A154951 <i>NPI:</i> 1578058665 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
SURGERY HAND		
YANG, GENE <i>Provider ID:</i> 280568 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A169156 <i>NPI:</i> 1568807089 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	STEPHENSON, SAMUEL K <i>Provider ID:</i> 284936 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A154951 <i>NPI:</i> 1578058665 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton	ABRAMS, REID <i>Provider ID:</i> 124050 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Male <i>License number:</i> G59829 <i>NPI:</i> 1548202245 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
SURGERY NEUROLOGICAL		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BARBA, DAVID

Provider ID: 275678
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR # 2A
 LA JOLLA, CA 92037-1300
Phone: (619) 543-5540
Fax: (619) 287-7663
After Hours Phone: (619) 543-5540
Provider Gender: Male
License number: G42092
NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARBA, DAVID

Provider ID: 65122
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (619) 543-5540
Fax: (619) 287-7663
After Hours Phone: (619) 543-5540
Provider Gender: Male
License number: G42092

NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEAUMONT, THOMAS L

Provider ID: 214126
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A159281
NPI: 1497067573
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BEN-HAIM, SHARONA

Provider ID: 244070
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A124866
NPI: 1942469663
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BLASKIEWICZ, DONALD J

Provider ID: 270282
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A109748
 NPI: 1215176839
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CIACCI, JOSEPH D

Provider ID: 65149
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: A50933
 NPI: 1992725675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Childrens Hosp And Resrch Ctr At Oakland, Rady

Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KHALESSI, ALEXANDER A

Provider ID: 244036
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A95850
 NPI: 1073786661
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

KHALESSI, ALEXANDER A

Provider ID: 65212
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8630
 Fax: (619) 543-6832
 After Hours Phone: (858) 657-8630
 Provider Gender: Male
 License number: A95850
 NPI: 1073786661
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 244149
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: C36547
 NPI: 1750306171
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 65245
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: C36547
 NPI: 1750306171
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Ucsd Medical Group
NGUYEN, ANDREW D
 Provider ID: 244139
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A91563
 NPI: 1720216542
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244054
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male

License number: A83715
 NPI: 1376568659
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244055
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A83715
 NPI: 1376568659
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A128616 <i>NPI:</i> 1437416591 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
OSORIO, JOSEPH A <i>Provider ID:</i> 242005 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A128616 <i>NPI:</i> 1437416591 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	PHAM, MARTIN H <i>Provider ID:</i> 244159 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A121590 <i>NPI:</i> 1609130921 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd	SANTIAGO DIEPPA, DAVID R <i>Provider ID:</i> 271118 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A132049 <i>NPI:</i> 1083984983 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
OSORIO, JOSEPH A <i>Provider ID:</i> 242006 <i>Board Certified Specialty:</i> No	SANTIAGO DIEPPA, DAVID R <i>Provider ID:</i> 271119 <i>Board Certified Specialty:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A132049
NPI: 1083984983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHWARTZ, MARC S

Provider ID: 244022
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G86573
NPI: 1508960188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles,

Valley Presbyterian Hosp, Martin Luther King Jr Community Hospital, Huntington Memorial Hospital, Providence Saint Johns Health Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHWARTZ, MARC S

Provider ID: 244023
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G86573
NPI: 1508960188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Valley Presbyterian Hosp, Martin Luther King Jr Community Hospital, Huntington Memorial Hospital, Providence Saint Johns Health Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEINBERG, JEFFREY A

Provider ID: 271100
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A131786
NPI: 1982044715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEINBERG, JEFFREY A

Provider ID: 271101
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A131786
 NPI: 1982044715
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TAYLOR, WILLIAM R

Provider ID: 65309
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-5540
 Fax:
 After Hours Phone: (619) 543-5540
 Provider Gender: Male
 License number: G72205
 NPI: 1528084522
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TUNG, HOWARD

Provider ID: 244083
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-5540
 Fax:
 After Hours Phone: (619) 543-5540
 Provider Gender: Male
 License number: G58235
 NPI: 1538153341
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Tri City Medical Ctr, Palomar Medical Center, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TUNG, HOWARD

Provider ID: 65313
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: G58235
 NPI: 1538153341
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Tri City Medical Ctr, Palomar Medical Center, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

U, HOI S

Provider ID: 244133
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G27898
 NPI: 1164468146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

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D. Directorio de proveedores de atención especializada

Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YOO, FRANK K , MD

Provider ID: 248120
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
 Phone: (858) 909-9033
 Fax: (858) 429-4009
 After Hours Phone: (858)
 909-9033
 Provider Gender: Male
 License number: G86513
 NPI: 1295774545
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean, Spanish, Telugu,
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr, Palomar Health
 Downtown Campus, Pomerado
 Hospital, Alvarado Hospital Llc,
 Paradise Valley Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

YOO, FRANK K

Provider ID: 91795
 Board Certified Specialty: No
 CALIFORNIA CANCER
 ASSOCS FOR RESEARCH AND
 EXCELL
 9850 GENESEE AVE STE 560
 LA JOLLA, CA 92037-1229
 Phone: (858) 909-9033
 Fax: (858) 429-4009
 After Hours Phone: (858)
 909-9033
 Provider Gender: Male
 License number: G86513
 NPI: 1295774545
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Korean, Spanish, Telugu,
 Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr, Palomar Health
 Downtown Campus, Pomerado
 Hospital, Alvarado Hospital Llc,
 Paradise Valley Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessability:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SURGERY ORTHOPEDIC

ALLEN, RICHARD T

Provider ID: 124053
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 657-8200
 Fax:
 After Hours Phone: (858)
 657-8200
 Provider Gender: Male
 License number: A83513
 NPI: 1962660175
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ALLEN, RICHARD T

Provider ID: 65115
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300

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D. Directorio de proveedores de atención especializada

Phone: (858) 657-8200
 Fax: (858) 657-8235
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: A83513
 NPI: 1962660175
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ATTENELLO, JOHN D
 Provider ID: 271083
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A166979
 NPI: 1629456553
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ATTENELLO, JOHN D
 Provider ID: 271084
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A166979
 NPI: 1629456553
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BALL, SCOTT T
 Provider ID: 124052
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350

Phone: (858) 657-8200
 Fax:
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: A75221
 NPI: 1952325318
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BALL, SCOTT T
 Provider ID: 65119
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8200
 Fax: (619) 543-7480
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: A75221
 NPI: 1952325318
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUKATA, SUSAN V

Provider ID: 277947
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: C55109
NPI: 1932140639
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHANG, DOUGLAS G

Provider ID: 124123
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200

Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, DOUGLAS G

Provider ID: 65139
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
543-2347
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHIARAPPA, FRANK E

Provider ID: 244460
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A164466
NPI: 1932536828
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284786
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8181
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A151613
 NPI: 1285097741
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284787
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A151613
 NPI: 1285097741
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CIDAMBI, KRISHNA R

Provider ID: 124274
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 865-7820
 Fax:
 After Hours Phone: (858) 865-7820
 Provider Gender: Male
 License number: A118350
 NPI: 1275836959
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tamil
 Cultural Competency: No
 Hospital Affiliation: Providence St Joseph Hospital, Hoag Orthopedic Institute, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CIDAMBI, KRISHNA R

Provider ID: 124275
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
 Phone: (858) 657-8235
 Fax:
 After Hours Phone: (858) 657-8235
 Provider Gender: Male
 License number: A118350
 NPI: 1275836959
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tamil
 Cultural Competency: No
 Hospital Affiliation: Providence St Joseph Hospital, Hoag Orthopedic Institute, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COVEY, DANA C

Provider ID: 104619
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-8200
 Fax: (619) 543-7480
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: G89432
 NPI: 1780651794
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DALSTROM, DAVID J

Provider ID: 125855
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112715
NPI: 1942333075
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Mammoth Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLINT, JAMES H

Provider ID: 203177
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A156864
NPI: 1629239140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARFIN, STEVEN R

Provider ID: 123783
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: G29309
NPI: 1679515829
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOEB, YANNICK L

Provider ID: 284792
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170529
NPI: 1730542747
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

GOEB, YANNICK L

Provider ID: 284793
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A170529
NPI: 1730542747
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GONZALES, FRANCIS B

Provider ID: 123851
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112963

NPI: 1841476546

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GONZALES, FRANCIS B

Provider ID: 65178
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A112963
NPI: 1841476546
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HENTZEN, ERIC R

Provider ID: 65190
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A83117
NPI: 1245411180
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KULIDJIAN, ANNA A

Provider ID: 65224
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A97060
NPI: 1215183066
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 126580
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350
Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A72975
NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 65248

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A72975
NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEYER, ROBERT S

Provider ID: 65250
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: G76677
NPI: 1316997646
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTSON, CATHERINE M

Provider ID: 65288
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
Phone: (858) 657-8200
Fax: (619) 543-7480
After Hours Phone: (858) 657-8200
Provider Gender: Female
License number: A87544
NPI: 1952565780
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCHWARTZ, ALEXANDRA K

Provider ID: 124198
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093-1350

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)
657-8200

Provider Gender: Female

License number: A60259

NPI: 1740206747

Provider English Spoken: Yes

Provider Language(s) Spoken:
German

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHWARTZ, ALEXANDRA K

Provider ID: 65297

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (619) 543-7480

After Hours Phone: (858)
657-8200

Provider Gender: Female

License number: A60259

NPI: 1740206747

Provider English Spoken: Yes

Provider Language(s) Spoken:
German

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SULLIVAN, THOMAS B

Provider ID: 285245

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A138132

NPI: 1437565488

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SULLIVAN, THOMAS B

Provider ID: 285246

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A138132

NPI: 1437565488

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

VITALE, KENNETH C

Provider ID: 104657

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-8200

Fax: (619) 543-7480

After Hours Phone: (858)
657-8200

Provider Gender: Male

License number: C132964

NPI: 1730176868

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> ZLOMISLIC, VINKO <i>Provider ID:</i> 124281 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-8200 <i>Fax:</i> (619) 543-7480 <i>After Hours Phone:</i> (858) 657-8200 <i>Provider Gender:</i> Male <i>License number:</i> A112819 <i>NPI:</i> 1346351509 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Serbo-Croatian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> ZLOMISLIC, VINKO <i>Provider ID:</i> 124285 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350	<i>Phone:</i> (858) 657-8200 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8200 <i>Provider Gender:</i> Male <i>License number:</i> A112819 <i>NPI:</i> 1346351509 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Serbo-Croatian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> SURGERY PLASTIC CHAO, JAMES J <i>Provider ID:</i> 65141 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9350 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (619) 543-2347 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2347 <i>Provider Gender:</i> Male <i>License number:</i> G85358 <i>NPI:</i> 1093740789 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Temecula	Valley Hospital Inc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> GOSMAN, AMANDA A <i>Provider ID:</i> 64887 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9300 CAMPUS POINT DR LA JOLLA, CA 92037-1300 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> (858) 966-4064 <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female <i>License number:</i> A96153 <i>NPI:</i> 1164436291 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A135631

NPI: 1346674561

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

KOLB, FREDERIC J

Provider ID: 246238

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: F39

NPI: 1790341832

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

REID, CHRISTOPHER M

Provider ID: 224796

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A122947

NPI: 1982964276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

SURGERY THORACIC

COLETTA, JOELLE M

Provider ID: 64852

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax:

After Hours Phone: (858)

657-7000

Provider Gender: Female

License number: A55001

NPI: 1447222377

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Sharp Memorial

Hospital, Ucsd Medical Ctr, Rady

Childrens Hospital San Diego,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

HOWE, STEVEN C

Provider ID: 90049

Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 657-7777
Fax: (858) 657-5058
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: G79076
NPI: 1497702740
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JAMIESON, STUART W
Provider ID: 65201
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: A35080
NPI: 1649203415
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KEARNS, MARK J
Provider ID: 274296
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-8817
Fax: (888) 539-8781
After Hours Phone: (858) 657-8817
Provider Gender: Male
License number: A158916
NPI: 1033683719
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KEARNS, MARK J
Provider ID: 274297
Board Certified Specialty: No
UCSD MEDICAL GROUP
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037-1337
Phone: (858) 647-8817
Fax: (858) 853-9878
After Hours Phone: (858) 647-8817
Provider Gender: Male
License number: A158916
NPI: 1033683719
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ONAITIS, MARK
Provider ID: 112339
Board Certified Specialty: No
UCSD MEDICAL GROUP
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093-1503
Phone: (858) 657-7777
Fax:
After Hours Phone: (858) 657-7777
Provider Gender: Male
License number: C144886

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1841310638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Tri City Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

POLLEMA, TRAVIS L

Provider ID: 99659

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL
1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: 20A12742

NPI: 1871752956

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 65019

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (858) 657-7000

Fax: (619) 543-3604

After Hours Phone: (858)

657-7000

Provider Gender: Male

License number: A113774

NPI: 1629385836

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

RAMIREZ, ALFREDO R

Provider ID: 256390

Board Certified Specialty: No

UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR FL
1

LA JOLLA, CA 92037-1337

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A101070

NPI: 1003829417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University

Hsp Of San Diego Co, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SAKAKIBARA, NAOHIDE

Provider ID: 65291

Board Certified Specialty: No

UCSD MEDICAL GROUP

9350 CAMPUS POINT DR

LA JOLLA, CA 92037-1300

Phone: (619) 543-7777

Fax:

After Hours Phone: (619)

543-7777

Provider Gender: Male

License number: A67153

NPI: 1588697916

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SIDERIS, ANTONIOS

Provider ID: 285652
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A173526
 NPI: 1134495336
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Greek, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SIDERIS, ANTONIOS

Provider ID: 285653
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A173526
 NPI: 1134495336
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Greek, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SIDERIS, ANTONIOS

Provider ID: 285654
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9434 MEDICAL CENTER DR FL 1
 LA JOLLA, CA 92037-1337
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A173526
 NPI: 1134495336
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Greek, Spanish
 Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 65311
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7777
 Fax: (619) 543-2652
 After Hours Phone: (858) 657-7777
 Provider Gender: Female
 License number: G84093
 NPI: 1831121789
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network, Ucsd Medical Group

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Reagan UCLA Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

SURGICAL ONCOLOGY

HYAMS, DAVID M

Provider ID: 276537
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G42387
NPI: 1992755391
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Desert Regional Med Ctr, Eisenhower Medical Ctr, John F Kennedy Memorial Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Provider Gender: Female
License number: A169163
NPI: 1982086922
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUTLER, PHILIP A , MD

Provider ID: 65710
Board Certified Specialty: Yes
GENESIS HEALTHCARE PARTNERS PC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7295
After Hours Phone: (858) 453-5944

Provider Gender: Male
License number: G47129
NPI: 1184665911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

UROLOGY

ALBO, MICHAEL E

Provider ID: 65112
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619) 543-6886
Provider Gender: Male
License number: G81920
NPI: 1912938499
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation: Ronald

Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RACE, ALICE J

Provider ID: 271831
Board Certified Specialty: No
UCSD MEDICAL GROUP
9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BUTLER, PHILIP A <i>Provider ID:</i> 65710 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 9850 GENESEE AVE STE 440 LA JOLLA, CA 92037-1212 <i>Phone:</i> (858) 453-5944 <i>Fax:</i> <i>After Hours Phone:</i> (858) 453-5944 <i>Provider Gender:</i> Male <i>License number:</i> G47129 <i>NPI:</i> 1184665911 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>NPI:</i> 1093756827 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
COHEN, EDWARD S <i>Provider ID:</i> 65713 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC 9850 GENESEE AVE STE 440 LA JOLLA, CA 92037-1212 <i>Phone:</i> (858) 453-5944 <i>Fax:</i> <i>After Hours Phone:</i> (858) 453-5944 <i>Provider Gender:</i> Male <i>License number:</i> G56844	COHEN, EDWARD S , MD <i>Provider ID:</i> 65713 <i>Board Certified Specialty:</i> Yes GENESIS HEALTHCARE PARTNERS PC 9850 GENESEE AVE STE 440 LA JOLLA, CA 92037-1212 <i>Phone:</i> (858) 453-5944 <i>Fax:</i> (858) 429-7925 <i>After Hours Phone:</i> (858) 453-5944 <i>Provider Gender:</i> Male <i>License number:</i> G56844 <i>NPI:</i> 1093756827 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	CRAWFORD, ELWARD D <i>Provider ID:</i> 244131 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 9400 CAMPUS POINT DR LA JOLLA, CA 92093-1350 <i>Phone:</i> (858) 657-7876 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (858) 657-7876 <i>Provider Gender:</i> Male <i>License number:</i> G35350 <i>NPI:</i> 1902814379 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group DERWEESH, ITHAAR H <i>Provider ID:</i> 64424 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093-1503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 822-6100
 Fax: (858) 822-6316
 After Hours Phone: (858) 822-6100
 Provider Gender: Male
 License number: C53383
 NPI: 1003873720
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HSIEH, TUNG CHIN

Provider ID: 277239
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9850 GENESEE AVE STE 800
 LA JOLLA, CA 92037-1219
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A120604
 NPI: 1073758652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KADER, ANDREW K

Provider ID: 65204
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 543-6886
 Fax: (858) 822-6188
 After Hours Phone: (619) 543-6886
 Provider Gender: Male
 License number: A116234
 NPI: 1184731127
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KANE, CHRISTOPHER J

Provider ID: 64438
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503

Phone: (858) 822-6100
 Fax:
 After Hours Phone: (858) 822-6100
 Provider Gender: Male
 License number: G69249
 NPI: 1083636294
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KANE, CHRISTOPHER J

Provider ID: 64932
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (619) 657-7876
 Fax:
 After Hours Phone: (619) 657-7876
 Provider Gender: Male
 License number: G69249
 NPI: 1083636294
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAITOH, JOHN

Provider ID: 55260
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 9850 GENESEE AVE STE 440
 LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: G82079
NPI: 1629010509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAITOH, JOHN, MD

Provider ID: 55260
Board Certified Specialty: No
GENESIS HEALTHCARE

PARTNERS PC
 9850 GENESEE AVE STE 440
 LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: G82079
NPI: 1629010509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NGUYEN, HUNG H , MD

Provider ID: 246842
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9850 GENESEE AVE STE 440
 LA JOLLA, CA 92037-1212
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Male
License number: A142209
NPI: 1023488806
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps

Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAKAMOTO, KYOKO

Provider ID: 64473
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3855 HEALTH SCIENCES DR
 LA JOLLA, CA 92093-1503
Phone: (858) 822-6193
Fax:
After Hours Phone: (858) 822-6193
Provider Gender: Female
License number: A80808
NPI: 1740223619
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUR, ROGER L

Provider ID: 65070
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (858) 657-7000
Fax:
After Hours Phone: (858)
657-7000
Provider Gender: Male
License number: G80585
NPI: 1932208022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUR, ROGER L

Provider ID: 65307
Board Certified Specialty: No
UCSD MEDICAL GROUP
9350 CAMPUS POINT DR
LA JOLLA, CA 92037-1300
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Male
License number: G80585
NPI: 1932208022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

UOKO, MARIA I

Provider ID: 284963
Board Certified Specialty: No
UCSD MEDICAL GROUP
9400 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YUH, BENJAMIN J

Provider ID: 283442
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037-1212

Phone: (858) 453-5944
Fax: (858) 429-7933
After Hours Phone: (858)
453-5944
Provider Gender: Male
License number: A125637
NPI: 1487092417
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Methodist
Hosp Of Southern California, City
Of Hope National Med Ctr,
Huntington Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LA MESA

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 262115
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 320
LA MESA, CA 91942-7001
Phone: (619) 377-6565
Fax: (619) 450-2111
After Hours Phone: (619)
377-6565
Provider Gender: Female
License number: C52581
NPI: 1053300251

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, SUMANA, MD

Provider ID: 82087
Board Certified Specialty: No
 SUMANA AND ANANTHRAM REDDY MD INC
 8860 CENTER DR STE 320
 LA MESA, CA 91942-7001
Phone: (619) 377-6565
Fax: (619) 450-2111
After Hours Phone: (619) 377-6565
Provider Gender: Female
License number: C52581
NPI: 1053300251
Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, SUMANA

Provider ID: 82087
Board Certified Specialty: No
 SUMANA AND ANANTHRAM REDDY MD INC
 8860 CENTER DR STE 320
 LA MESA, CA 91942-7001
Phone: (619) 377-6565
Fax:
After Hours Phone: (619) 377-6565
Provider Gender: Female
License number: C52581
NPI: 1053300251
Provider English Spoken: Yes
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J

Provider ID: 204414
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7051 ALVARADO RD # 101
 LA MESA, CA 91942-8901
Phone: (619) 625-1144
Fax:
After Hours Phone: (619) 625-1144
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital, Pomerado Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VERDOLIN, MICHAEL H , MD

Provider ID: 203328
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7051 ALVARADO RD # 101
 LA MESA, CA 91942-8901
Phone: (619) 625-1144
Fax: (619) 872-0964
After Hours Phone: (619) 625-1144
Provider Gender: Male
License number: A92149

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1477525657
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

CARDIOLOGY

SHEREV, DIMITRI A , MD
 Provider ID: 65688
 Board Certified Specialty: No
 SHEREV HEART AND VASCULAR CLINIC INC
 8851 CENTER DR STE 304
 LA MESA, CA 91942-3048
 Phone: (619) 867-0557
 Fax: (619) 867-0558
 After Hours Phone: (619) 867-0557
 Provider Gender: Male
 License number: A70917
 NPI: 1154323996
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Bulgarian, Malayalam, Russian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital, Alvarado Community Hospital, Sharp Memorial Hospital, Scripps Memorial Hospital, Alvarado Hospital Llc, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

YELLEN, LAURENCE G , MD
 Provider ID: 269173
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 405
 LA MESA, CA 91942-3198
 Phone: (619) 582-2404
 Fax: (619) 243-3236
 After Hours Phone: (619) 582-2404
 Provider Gender: Male
 License number: G15453
 NPI: 1477680551
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Community Care Ipa Llc

CARDIOVASCULAR DISEASE

BOGHAIRI, ANOUSHIRAVAN, MD
 Provider ID: 269055
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 115
 LA MESA, CA 91942-3021
 Phone: (619) 698-6667
 Fax: (619) 698-6684
 After Hours Phone: (619) 698-6667
 Provider Gender: Male
 License number: A33832
 NPI: 1255549184
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, Persian
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

KOTHA, PURUSHOTHAM, MD
 Provider ID: 32053
 Board Certified Specialty: No
 PURUSHOTHAM AND AKTHER KOTHA MD INC
 8860 CENTER DR STE 400
 LA MESA, CA 91942-7003

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D. Directorio de proveedores de atención especializada

Phone: (619) 229-1995
 Fax:
 After Hours Phone: (619) 229-1995
 Provider Gender: Male
 License number: A41538
 NPI: 1093730814
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Spanish, Telugu
 Cultural Competency: No
 Hospital Affiliation: Mercy Medical Center Merced Dominican Campus, Alvarado Hospital Llc, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REDDY, REDDIWANDLA S
 Provider ID: 265393
 Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 5565 GROSSMONT CENTER DR STE 202
 LA MESA, CA 91942-3022
 Phone: (619) 461-6130
 Fax: (619) 461-3108
 After Hours Phone: (619) 461-6130
 Provider Gender: Male
 License number: A38098
 NPI: 1710996384
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Kannada, Spanish, Telugu
 Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct

CERTIFIED BEHAVIORAL ANALYST MASTERS

ALLEN, DAVID
 Provider ID: 104053
 Board Certified Specialty: No
 LETS GROW INC
 7373 UNIVERSITY AVE STE 202
 LA MESA, CA 91942-0524
 Phone: (619) 713-0737
 Fax:
 After Hours Phone: (619) 713-0737
 Provider Gender: Male
 License number: BCBA13011
 NPI: 1306186549
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
<https://www.letsgrowaba.com/home.html>

Email:
 Medical Group(s):
 IPA:
ALLEN, SHARRONDA
 Provider ID: 103951
 Board Certified Specialty: No
 LETS GROW INC
 7373 UNIVERSITY AVE STE 202
 LA MESA, CA 91942-0524
 Phone: (619) 713-0737
 Fax:
 After Hours Phone: (619) 713-0737
 Provider Gender: Female
 License number: BCBA8724
 NPI: 1124385398
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
<https://www.letsgrowaba.com/home.html>
 Email:
 Medical Group(s):
 IPA:

MEDRANO, JOSEPH
 Provider ID: 104072
 Board Certified Specialty: No
 LETS GROW INC
 7373 UNIVERSITY AVE STE 202
 LA MESA, CA 91942-0524

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D. Directorio de proveedores de atención especializada

Phone: (619) 713-0737
 Fax:
 After Hours Phone: (619) 713-0737
 Provider Gender: Male
 License number: BCBA15889
 NPI: 1902218605
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
<https://www.letsgrowaba.com/home.html>
 Email:
 Medical Group(s):
 IPA:

CERTIFIED NURSE PRACTITIONER

ALBANO, RIZALINA
 Provider ID: 128828
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax:
 After Hours Phone: (619) 461-3880
 Provider Gender: Female
 License number: NP95005436
 NPI: 1811430820
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog

Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LOYOLA, MARY ANN P , NPA
 Provider ID: 242398
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Female
 License number: NP95011408
 NPI: 1881154037
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog

Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NGILLA MCGRAW, MEAGHAN D
 Provider ID: 238730

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
 Phone: (619) 464-6434
 Fax:
 After Hours Phone: (619) 464-6434
 Provider Gender: Female
 License number: NP23792
 NPI: 1356461842
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NGILLA MCGRAW, MEAGHAN D
 Provider ID: 238731
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942-3187
 Phone: (619) 464-6434
 Fax:
 After Hours Phone: (619) 464-6434
 Provider Gender: Female
 License number: NP23792
 NPI: 1356461842

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RESTELLI, LYNDSEY

Provider ID: 217692
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 200
 LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Provider Gender: Female
License number: NP95007632
NPI: 1558854000
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

RESTELLI, LYNDSEY

Provider ID: 217693
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8881 FLETCHER PKWY STE 205
 LA MESA, CA 91942-3187
Phone: (619) 464-6434
Fax:
After Hours Phone: (619) 464-6434
Provider Gender: Female
License number: NP95007632
NPI: 1558854000
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EMERGENCY MEDICINE

BELLOMO, THOMAS N

Provider ID: 205600
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5565 GROSSMONT CENTER DR STE 2 # 2
 LA MESA, CA 91942-3037

Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Male
License number: G69193
NPI: 1700926698
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOW, BYRON C

Provider ID: 206096
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5565 GROSSMONT CENTER DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KEARNEY, LAUREN K
Provider ID: 206220
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5565 GROSSMONT CENTER
DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: G83666
NPI: 1740296268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Health Downtown
Campus, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
LOVEJOY, AMY E
Provider ID: 206106
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5565 GROSSMONT CENTER
DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: A75176
NPI: 1790856557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MINKA, GENEVIEVE M
Provider ID: 205335
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MISHRA-OCCHINO, SEEMA S
Provider ID: 205405
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
5565 GROSSMONT CENTER
DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
713-5375
Provider Gender: Female
License number: A100307
NPI: 1689612830
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PARIKH, PAYAL

Provider ID: 205868
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Kaiser Foundation Hospital San
 Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network
PARKER, SHERINE B
Provider ID: 205786
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: G81658
NPI: 1477626513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Glendale
 Adventist Med Ctr, Glendale
 Memorial Hosp And Health Ctr,
 Tri City Medical Ctr, Rady
 Childrens Hospital San Diego,
 Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

RILEY-HAGAN, MARGARET
Provider ID: 205986
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A143536
NPI: 1740560044

ROSE, OLGA D
Provider ID: 205953
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A143536
NPI: 1740560044

NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ROSE, OLGA D
Provider ID: 205953
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5565 GROSSMONT CENTER
 DR STE 2 # 2
 LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619)
 713-5375
Provider Gender: Female
License number: A143536
NPI: 1740560044

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD
Provider ID: 268693
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR
 LA MESA, CA 91942-3020
Phone: (619) 589-5414
Fax: (619) 589-7391
After Hours Phone: (619) 589-5414
Provider Gender: Female
License number: HA7100
NPI: 1063558856
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc
DANDURAND, JOHN M , MD
Provider ID: 269782
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR
 LA MESA, CA 91942-3020
Phone: (619) 589-5414
Fax: (619) 589-7391
After Hours Phone: (619) 589-5414
Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEMATOLOGY / ONCOLOGY

MEDIC, IGOR, MD
Provider ID: 119509
Board Certified Specialty: No
 CANCER CENTER ONCOLOGY MEDICAL GROUP INC

5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619) 644-3030
Provider Gender: Male
License number: A146970
NPI: 1154618593
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Serbian, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INFECTIOUS DISEASE

HADDAD, FADI A
Provider ID: 40943
Board Certified Specialty: No
 FADI A HADDAD MD INC
 8860 CENTER DR STE 320
 LA MESA, CA 91942-7001
Phone: (619) 376-1904
Fax:
After Hours Phone: (619) 376-1904
Provider Gender: Male
License number: A80687
NPI: 1689692956
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Mercy Hospital Chula Vista, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.haddadclinic.com
Email:
Medical Group(s):
IPA:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Female
License number: A83701
NPI: 1477641967
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

INTERNAL MEDICINE

DELA CRUZ, JUNE T

Provider ID: 57266
Board Certified Specialty: No
 SAN DIEGO CRITICAL CARE MED GRP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Female
License number: A54445
NPI: 1689784886
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W

Provider ID: 101612
Board Certified Specialty: No
 SAN DIEGO CRITICAL CARE MED GRP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A128773
NPI: 1568740355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARLAPATI, ANITHA R

Provider ID: 57273
Board Certified Specialty: No
 SAN DIEGO CRITICAL CARE MED GRP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019

HASSANEIN, MOHAMED K

Provider ID: 109541
Board Certified Specialty: No
 SAN DIEGO CRITICAL CARE MED GRP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A135448
NPI: 1164794673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sutter Medical Center Sacramento, Sutter Roseville Medical Center, Marin General Hosp

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JALIL, ANMAR B

Provider ID: 108361
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A139378
NPI: 1588907174
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOHEDIN, BARZAN

Provider ID: 52461
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE

MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A50839
NPI: 1639235096
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Kurdish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MURALIDHARA, SOWMYA A

Provider ID: 102750
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Female
License number: A114660
NPI: 1851533285
Provider English Spoken: Yes
Provider Language(s) Spoken:

Hindi, Kannada, Tamil
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAUL, RABEE Y

Provider ID: 102682
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619) 713-5014
Provider Gender: Male
License number: A133752
NPI: 1659503241
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

SEIKALY, VICTOR E

Provider ID: 58388
 Board Certified Specialty: No
 SAN DIEGO CRITICAL CARE
 MED GRP INC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 713-5014
 Fax:
 After Hours Phone: (619)
 713-5014
 Provider Gender: Male
 License number: A50852
 NPI: 1235158320
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD, MD

Provider ID: 269161
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 405
 LA MESA, CA 91942-3198

Phone: (619) 582-2404
 Fax:
 After Hours Phone: (619)
 582-2404
 Provider Gender: Male
 License number: C56208
 NPI: 1275514986
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 258903
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710
 Provider Gender: Female
 License number: A116982
 NPI: 1447428420
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Hospital

Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Sharp Mary Birch
 Hosp For Women And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

ADAMCZAK, JOANNA E

Provider ID: 287121
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942-3044
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858)
 966-6710
 Provider Gender: Female
 License number: A116982
 NPI: 1447428420
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Sharp Mary Birch
 Hosp For Women And Newborns
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 272676
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5555 GROSSMONT CENTER DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ADAMI, REBECCA R

Provider ID: 287131

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8851 CENTER DR STE 201

LA MESA, CA 91942-3044

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 258872

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5555 GROSSMONT CENTER DR

LA MESA, CA 91942-3019

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CASELE, HOLLY L

Provider ID: 287073

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8851 CENTER DR STE 201

LA MESA, CA 91942-3044

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 258848
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 278851
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5565 GROSSMONT CENTER DR STE 2 # 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 287063
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8851 CENTER DR STE 201
LA MESA, CA 91942-3044
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider ID: 244873
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M
Provider ID: 287116
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942-3044
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758

NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Sharp Grossmont Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C
Provider ID: 287095
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942-3044
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHWENDEMANN, WADE D
Provider ID: 287081
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 8851 CENTER DR STE 201
 LA MESA, CA 91942-3044
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network	5555 GROSSMONT CENTER DR # 2 LA MESA, CA 91942-3019 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A130149 NPI: 1760730758 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	License number: A130149 NPI: 1760730758 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
TITH, TEVY Provider ID: 287053 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 8851 CENTER DR STE 201 LA MESA, CA 91942-3044 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A103521 NPI: 1588816086 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	WESTERMANN, MELISSA L Provider ID: 287085 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 8851 CENTER DR STE 201 LA MESA, CA 91942-3044 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female	WILLIAMS, KRISTIN M Provider ID: 277384 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A72985 NPI: 1992847131 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Stanford

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Health Care, Lucile Salter
Packard Childrens Hosp, San
Mateo Medical Ctr, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr,
California Pacific Med Ctr, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WILLIAMS, KRISTIN M

Provider ID: 287113
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8851 CENTER DR STE 201
LA MESA, CA 91942-3044
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Lucile Salter
Packard Childrens Hosp, San
Mateo Medical Ctr, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr,
California Pacific Med Ctr, Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEPHROLOGY

DO, LUAN K

Provider ID: 262108
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Male
License number: A65161
NPI: 1538156245
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical
Group-Sd

DO, LUAN K , MD

Provider ID: 43077
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Male
License number: A65161
NPI: 1538156245
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

DO, LUAN K

Provider ID: 43077
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: A65161
 NPI: 1538156245
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FADDA, GEORGE Z

Provider ID: 262184
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: A44918
 NPI: 1619972247
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French

Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FADDA, GEORGE Z , MD

Provider ID: 26465
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: A44918
 NPI: 1619972247
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical Group-Sd

FADDA, GEORGE Z

Provider ID: 26466
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: A44918
 NPI: 1619972247
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, French
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M

Provider ID: 262152
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059

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D. Directorio de proveedores de atención especializada

Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Female
 License number: A53843
 NPI: 1467458620
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M , MD

Provider ID: 26595
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Female
 License number: A53843
 NPI: 1467458620
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/0
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, LUCY M

Provider ID: 26595
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax:
 After Hours Phone: (619) 461-3880
 Provider Gender: Female
 License number: A53843
 NPI: 1467458620
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C , MD

Provider ID: 24866
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: G83902
 NPI: 1770663890
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C

Provider ID: 24866
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Phone: (619) 461-3880
 Fax:
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: G83902
 NPI: 1770663890
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

THOMPSON, JOHN C

Provider ID: 262352
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: G83902
 NPI: 1770663890
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish

Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NEUROLOGY

CHENG, YU D

Provider ID: 26929
 Board Certified Specialty: No
 ER KAI GAO MD INC
 8851 CENTER DR STE 603
 LA MESA, CA 91942-3063
 Phone: (619) 667-4545
 Fax: (619) 667-4550
 After Hours Phone: (619) 667-4545
 Provider Gender: Male
 License number: A79461
 NPI: 1336226471
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA:

GAO, ER-KAI

Provider ID: 26677
 Board Certified Specialty: No
 ER KAI GAO MD INC
 8851 CENTER DR STE 603
 LA MESA, CA 91942-3063
 Phone: (619) 667-4545
 Fax: (619) 667-4550
 After Hours Phone: (619) 667-4545
 Provider Gender: Male
 License number: A71659
 NPI: 1710064944
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese, Mandarin
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MOHAMMAD, AHMAD SHAH

Provider ID: 39868
 Board Certified Specialty: No
 EAST COUNTY NEUROLOGY ASSOCIATES INC
 8851 CENTER DR STE 307
 LA MESA, CA 91942-6006

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 337-7900
 Fax: (619) 337-7902
 After Hours Phone: (619) 337-7900
 Provider Gender: Male
 License number: A98831
 NPI: 1902973472
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, French, German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOHAMMAD, AHMAD SHAH, MD

Provider ID: 39868
 Board Certified Specialty: No
 EAST COUNTY NEUROLOGY ASSOCIATES INC
 8851 CENTER DR STE 307
 LA MESA, CA 91942-6006
 Phone: (619) 337-7900
 Fax: (619) 337-7902
 After Hours Phone: (619) 337-7900
 Provider Gender: Male
 License number: A98831
 NPI: 1902973472
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Arabic, Farsi, French, German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OPHTHALMOLOGY

BINDER, NICHOLAS R

Provider ID: 262355
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 5565 GROSSMONT CENTER DR STE 2 # 3
 LA MESA, CA 91942-3037
 Phone: (619) 697-4600
 Fax: (619) 464-5526
 After Hours Phone: (619) 697-4600
 Provider Gender: Male
 License number: A124698
 NPI: 1306076716
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R , MD

Provider ID: 268754
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 2 # 3
 LA MESA, CA 91942-3037
 Phone: (619) 697-4600
 Fax: (619) 464-5526
 After Hours Phone: (619) 697-4600

Provider Gender: Male
 License number: A124698
 NPI: 1306076716
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R

Provider ID: 288647

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
 722-8460
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

CARRABY, ARNETT
Provider ID: 116394
Board Certified Specialty: No
CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: G47836
NPI: 1366530792
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center,
 Pioneers Memorial Hospital,
 Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARRABY, ARNETT, MD
Provider ID: 269060
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: G47836
NPI: 1366530792
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center,
 Pioneers Memorial Hospital,
 Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAVEZ, CESAR T , MD
Provider ID: 268778
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: G51615
NPI: 1720082563
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center,
 Paradise Valley Hospital, Scripps
 Mercy Hospital, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CODEN, DANIEL J
Provider ID: 288657
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942-7435

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Provider Gender: Male
 License number: G57587
 NPI: 1942317508
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DELENGOCKY, TAYSON

Provider ID: 116393
 Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax:
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DELENGOCKY, TAYSON

Provider ID: 268959
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: 20A12784
 NPI: 1164637153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Farsi, French, Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ECHEGOYEN, JULIO C , MD

Provider ID: 268935
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
 Phone: (619) 425-7755
 Fax: (619) 425-2138
 After Hours Phone: (619) 425-7755
 Provider Gender: Male
 License number: A121431
 NPI: 1770801540
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Paradise Valley Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GOLLOGLY, HEIDRUN E

Provider ID: 262383
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942-3078
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Female
 License number: A134761

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1477879823

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, German, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

GOLLOGLY, HEIDRUN E , MD

Provider ID: 269127

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 551

LA MESA, CA 91942-3078

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

License number: A134761

NPI: 1477879823

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, German, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist

Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

GOLLOGLY, HEIDRUN E

Provider ID: 288654

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Provider Gender: Female

License number: A134761

NPI: 1477879823

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, German, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Adventist Health And Rideout, Grossmont Hospital, Desert Regional Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HAIGHT, BRUCE T , MD

Provider ID: 269112

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 3 # 551

LA MESA, CA 91942-3007

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Provider Gender: Male

License number: G41117

NPI: 1427029628

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HAIGHT, BRUCE T

Provider ID: 288660

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Provider Gender: Male

License number: G41117

NPI: 1427029628

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HO, JOSEPH, MD

Provider ID: 268884

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 2 # 3

LA MESA, CA 91942-3037

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

License number: A137389

NPI: 1962766451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Temecula
Valley Hospital Inc, Southwest

Healthcare System Murrieta,
Scripps Memorial Hospital,
Desert Regional Med Ctr,
Grossmont Hospital, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KATZMAN, BARRY

Provider ID: 288704

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Provider Gender: Male

License number: A34834

NPI: 1760473797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado
Hosp Med Ctr, Sharp Memorial
Hospital, Paradise Valley
Hospital, Alvarado Hospital Llc,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KOWNACKI, JOHN

Provider ID: 262426

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5565 GROSSMONT CENTER
DR STE 3 # 551

LA MESA, CA 91942-3007

Phone: (619) 465-2020

Fax: (844) 897-3788

After Hours Phone: (619)
465-2020

Provider Gender: Male

License number: G84672

NPI: 1225189418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

MANI, MAJID

Provider ID: 116386

Board Certified Specialty: Yes
CALIFORNIA RETINA ASSOCS
8851 CENTER DR # 406
LA MESA, CA 91942-3017

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, MAJID, MD

Provider ID: 269194
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No

Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, NASRIN

Provider ID: 116388
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, NASRIN, MD

Provider ID: 269200
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCGRAW, JOSEPH P , MD

Provider ID: 269699
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942-3078

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Provider Gender: Male
 License number: A155228
 NPI: 1588624852
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MCGRAW, JOSEPH P

Provider ID: 288659
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942-7435
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Provider Gender: Male
 License number: A155228
 NPI: 1588624852
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262448
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 5565 GROSSMONT CENTER DR STE 2 # 3
 LA MESA, CA 91942-3037
 Phone: (800) 898-2020
 Fax: (844) 897-3788
 After Hours Phone: (800) 898-2020
 Provider Gender: Male
 License number: G52627
 NPI: 1982636031

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, DOUGLAS G

Provider ID: 288693
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942-7435
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619) 722-8460
 Provider Gender: Male
 License number: G52627
 NPI: 1982636031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 262325
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 5565 GROSSMONT CENTER DR STE 3 # 551
 LA MESA, CA 91942-3007
 Phone: (619) 465-2020
 Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
 Provider Gender: Male
 License number: A125435
 NPI: 1235366782
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	American Sign Language (ASL): Group-Sd No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MOSS, JASON M , MD Provider ID: 268758 Board Certified Specialty: No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A130529 NPI: 1386961423 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
MORRISON-REYES, JOSHUA A , MD Provider ID: 269182 Board Certified Specialty: No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 3 # 551 LA MESA, CA 91942-3007 Phone: (619) 465-2020 Fax: (619) 698-1189 After Hours Phone: (619) 465-2020 Provider Gender: Male License number: A125435 NPI: 1235366782 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999	MORRISON-REYES, JOSHUA A Provider ID: 288662 Board Certified Specialty: No COMMUNITY CARE IPA LLC 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942-7435 Phone: (619) 722-8460 Fax: (619) 722-8465 After Hours Phone: (619) 722-8460 Provider Gender: Male License number: A125435 NPI: 1235366782 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical	NAJAFI, DAVID J Provider ID: 39835 Board Certified Specialty: No ALLIANCE RETINA CONSULTANTS INC 8262 UNIVERSITY AVE LA MESA, CA 91942-9321

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 668-0045 Fax: After Hours Phone: (619) 668-0045 Provider Gender: Male License number: A68124 NPI: 1396715991 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, Persian, Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PATEL, GITANE Provider ID: 262322 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
PAPASTERGIOU, GEORGIOS MD Provider ID: 116392 Board Certified Specialty: Yes CALIFORNIA RETINA ASSOCS 8851 CENTER DR # 406 LA MESA, CA 91942-3017 Phone: (619) 425-7755 Fax: After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A127706 NPI: 1790054393 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish Cultural Competency: No Hospital Affiliation: El Centro	PAPASTERGIOU, GEORGIOS, MD Provider ID: 269191 Board Certified Specialty: No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A127706 NPI: 1790054393 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish Cultural Competency: No Hospital Affiliation: El Centro Regional Medical Center, Scripps Memorial Hospital, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM	PATEL, GITANE Provider ID: 262322 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 288653
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE J
 AND K

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
 722-8460

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Paradise Valley

Hospital, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PATEL, SARJAN H

Provider ID: 262406

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

5565 GROSSMONT CENTER

DR STE 2 # 3

LA MESA, CA 91942-3037

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)

898-2020

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PATEL, SARJAN H

Provider ID: 288663

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7339 EL CAJON BLVD STE J

AND K

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)

722-8460

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,

Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Grossmont Hospital,

Scripps Memorial Hospital,

Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

PEAIRS, JAMES J

Provider ID: 126598

Board Certified Specialty: No

CALIFORNIA RETINA ASSOCS

8851 CENTER DR # 406

LA MESA, CA 91942-3017

Phone: (619) 425-7755

Fax:

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A155296

NPI: 1609135623

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Memorial

Hospital, El Centro Regional

Medical Center, Sharp Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942-7435 <i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> (619) 722-8460 <i>Provider Gender:</i> Male <i>License number:</i> C37934 <i>NPI:</i> 1194832725 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Hospital Affiliation:</i> Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
PEAIRS, JAMES J , MD <i>Provider ID:</i> 268820 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A155296 <i>NPI:</i> 1609135623 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	PONS, MAURICIO E <i>Provider ID:</i> 116389 <i>Board Certified Specialty:</i> No CALIFORNIA RETINA ASSOCS 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A87650 <i>NPI:</i> 1376723759 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	PONS, MAURICIO E , MD <i>Provider ID:</i> 269243 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 8851 CENTER DR # 406 LA MESA, CA 91942-3017 <i>Phone:</i> (619) 425-7755 <i>Fax:</i> (619) 425-2138 <i>After Hours Phone:</i> (619) 425-7755 <i>Provider Gender:</i> Male <i>License number:</i> A87650 <i>NPI:</i> 1376723759 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>
PERRY, ARTHUR C <i>Provider ID:</i> 288656 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc PRABHU, SUJATA P <i>Provider ID:</i> 262395 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5565 GROSSMONT CENTER DR STE 2 # 3 LA MESA, CA 91942-3037 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PRABHU, SUJATA P <i>Provider ID:</i> 262396 <i>Board Certified Specialty:</i> No	IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5565 GROSSMONT CENTER DR STE 3 # 551 LA MESA, CA 91942-3007 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PRABHU, SUJATA P <i>Provider ID:</i> 288696 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942-7435	<i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> (619) 722-8460 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog, Telugu, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No 📞 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PRATT, STEVEN G <i>Provider ID:</i> 288655 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942-7435 <i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> (619) 722-8460 <i>Provider Gender:</i> Male <i>License number:</i> G32379 <i>NPI:</i> 1407963044 <i>Provider English Spoken:</i> Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAJSBAUM, MARTIN

Provider ID: 117838
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A42670
NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RICE, LAWRENCE S , MD

Provider ID: 269038
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RICE, LAWRENCE S

Provider ID: 288646
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SASSANI, PATRICK P , MD

Provider ID: 269077
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Chula
 Vista Med Ctr, El Centro
 Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHER, BARRY M , MD

Provider ID: 268829
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: G23827
NPI: 1235106899
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Scripps Mercy
 Hospital Chula Vista, Scripps
 Mercy Hospital, Paradise Valley
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKAF, AYHAM R
Provider ID: 116391
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider ID: 116391
Board Certified Specialty: No
 CALIFORNIA RETINA ASSOCS
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017
Phone: (619) 425-7755
Fax:
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKAF, AYHAM R , MD

Provider ID: 269075
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR # 406
 LA MESA, CA 91942-3017

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
 425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
 Regional Medical Center, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZABANEH, ALEXANDER I

Provider ID: 262170
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 5565 GROSSMONT CENTER
 DR STE 3
 LA MESA, CA 91942-3007
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
 898-2020
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I , MD

Provider ID: 269123

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5565 GROSSMONT CENTER
 DR STE 551

LA MESA, CA 91942-3078

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Male

License number: A154697

NPI: 1346687233

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

OTOLARYNGOLOGY

BUSINO, ROWLEY S

Provider ID: 262172

Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

5565 GROSSMONT CENTER
 DR STE 3 # 101

LA MESA, CA 91942-3007

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619) 464-3353

Provider Gender: Female

License number: A112508

NPI: 1396997664

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, French, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, South Coast Global Medical Center Inc, Orange County Global Medical Center Inc, Scripps Mercy Hospital

Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med

Ctr, Rady Childrens Hospital San

Diego, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BUSINO, ROWLEY S , MD

Provider ID: 53306

Board Certified Specialty: No
 EAR NOSE AND THROAT OF
 SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 101

LA MESA, CA 91942-3021

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619) 464-3353

Provider Gender: Female

License number: A112508

NPI: 1396997664

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic, French, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, South Coast Global Medical Center Inc, Orange County Global Medical Center Inc, Scripps Mercy Hospital

Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med

Ctr, Rady Childrens Hospital San

Diego, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DRISKILL, BRENT R

Provider ID: 121484
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 101
 LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: C146197
NPI: 1477612372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DRISKILL, BRENT R

Provider ID: 121484
Board Certified Specialty: No
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 101
 LA MESA, CA 91942-3021

Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: C146197
NPI: 1477612372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MCCALLION, PATRICK G

Provider ID: 26600
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 3 # 101
 LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: G64989
NPI: 1134144454
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish

Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MCCALLION, PATRICK G , MD

Provider ID: 26600
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF SAN DIEGO A MED CORP
 5565 GROSSMONT CENTER
 DR STE 3 # 101
 LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
License number: G64989
NPI: 1134144454
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MOLES, JEREMIAH J , MD

Provider ID: 46814
Board Certified Specialty: No
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A112009
NPI: 1003067745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish, Tongan
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Chula Vista Med
Ctr, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MOLES, JEREMIAH J

Provider ID: 46814
Board Certified Specialty: No
EAR NOSE AND THROAT OF

SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A112009
NPI: 1003067745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish, Tongan
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Chula Vista Med
Ctr, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATSIAS, ALEXIS, MD

Provider ID: 243551
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 101
LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Female
License number: A160436

NPI: 1326452855
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PITZER, GEOFFREY B

Provider ID: 103378
Board Certified Specialty: Yes
EAR NOSE AND THROAT OF
SAN DIEGO A MED CORP
5565 GROSSMONT CENTER
DR STE 3 # 101
LA MESA, CA 91942-3007
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619)
464-3353
Provider Gender: Male
License number: A125888
NPI: 1770673238
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PITZER, GEOFFREY B

Provider ID: 103378
 Board Certified Specialty: Yes
 MOUNTAIN HLTH & COMM SERVICES
 5565 GROSSMONT CENTER DR STE 3 # 101
 LA MESA, CA 91942-3007
 Phone: (619) 464-3353
 Fax: (619) 464-6720
 After Hours Phone: (619) 464-3353
 Provider Gender: Male
 License number: A125888
 NPI: 1770673238
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical Group-Sd

PITZER, GEOFFREY B , MD

Provider ID: 103378
 Board Certified Specialty: Yes
 MOUNTAIN HLTH & COMM SERVICES
 5565 GROSSMONT CENTER DR STE 3 # 101
 LA MESA, CA 91942-3007
 Phone: (619) 464-3353
 Fax: (619) 464-6720
 After Hours Phone: (619) 464-3353
 Provider Gender: Male
 License number: A125888
 NPI: 1770673238
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PITZER, GEOFFREY B , MD

Provider ID: 103378
 Board Certified Specialty: Yes
 EAR NOSE AND THROAT OF SAN DIEGO A MED CORP

5565 GROSSMONT CENTER DR STE 3 # 101
 LA MESA, CA 91942-3007
 Phone: (619) 464-3353
 Fax: (619) 464-6720
 After Hours Phone: (619) 464-3353
 Provider Gender: Male
 License number: A125888
 NPI: 1770673238
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SCHALCH LEPE, PAUL, MD

Provider ID: 122525
 Board Certified Specialty: No
 MOUNTAIN HLTH & COMM SERVICES
 5565 GROSSMONT CENTER DR
 LA MESA, CA 91942-3020
 Phone: (619) 464-3353
 Fax: (619) 464-6720
 After Hours Phone: (619) 464-3353
 Provider Gender: Male
 License number: A92839

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1558550053 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Hospital, Scripps Mercy Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
SCHALCH LEPE, PAUL, MD Provider ID: 269980 Board Certified Specialty: No COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 101 LA MESA, CA 91942-3021 Phone: (619) 464-3353 Fax: (619) 464-6720 After Hours Phone: (619) 464-3353 Provider Gender: Male License number: A92839 NPI: 1558550053 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: No Hospital Affiliation: Grossmont	SKELTON, SEAN C Provider ID: 122638 Board Certified Specialty: Yes EAR NOSE AND THROAT OF SAN DIEGO A MED CORP 5565 GROSSMONT CENTER DR STE 3 # 101 LA MESA, CA 91942-3007 Phone: (619) 464-3353 Fax: (619) 464-6720 After Hours Phone: (619) 464-3353 Provider Gender: Male License number: 20A7852 NPI: 1063592277 Provider English Spoken: Yes Provider Language(s) Spoken: Japanese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	SKELTON, SEAN C Provider ID: 269028 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 5565 GROSSMONT CENTER DR STE 3 # 101 LA MESA, CA 91942-3007 Phone: (619) 464-3353 Fax: (619) 464-6720 After Hours Phone: (619) 464-3353 Provider Gender: Male License number: 20A7852 NPI: 1063592277 Provider English Spoken: Yes Provider Language(s) Spoken: Japanese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
PEDIATRIC EMERGENCY		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MEDICINE		
JOSHI, WEENA E Provider ID: 262233 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 5565 GROSSMONT CENTER DR STE 2 # 2 LA MESA, CA 91942-3037 Phone: (619) 713-5375 Fax: (619) 713-5379 After Hours Phone: (619) 713-5375 Provider Gender: Female License number: A91208 NPI: 1376862177 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Phone: (619) 713-5375 Fax: (619) 713-5379 After Hours Phone: (619) 713-5375 Provider Gender: Female License number: A126911 NPI: 1659632362 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
KANTHARIA, TINA H Provider ID: 206290 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 5565 GROSSMONT CENTER DR # 22 LA MESA, CA 91942-3020	VARGAS, JACLYN Provider ID: 285936 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female License number: A144447 NPI: 1619359718 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Lac Usc Medical Center	PEDIATRIC INFECTIOUS DISEASES CHRISTMAN, JAMESINA C Provider ID: 259981 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942-3037 Phone: (619) 713-5375 Fax: (619) 713-5379 After Hours Phone: (619) 713-5375 Provider Gender: Female License number: A93574 NPI: 1538372032 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/19 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

DUONG, THU A

Provider ID: 260355

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

5565 GROSSMONT CENTER
DR STE 2 # 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)
713-5375

Provider Gender: Female

License number: A127187

NPI: 1326309881

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Phone: (619) 698-2184

Fax: (619) 698-2084

After Hours Phone: (619)
698-2184

Provider Gender: Female

License number: A45273

NPI: 1982686200

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CLAY, CORRIE T

Provider ID: 278807

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)

464-6434

Provider Gender: Female

License number: A91977

NPI: 1437207750

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Grossmont Hospital, Sharp Mary

Birch Hosp For Women And
Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct

DE LA ROSA, IVONNE E

Provider ID: 206028

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

5565 GROSSMONT CENTER
DR STE 2

LA MESA, CA 91942-3037

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)

713-5375

Provider Gender: Female

License number: A49734

NPI: 1174695795

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital, Sharp

Memorial Hospital, Rady

Childrens Hospital San Diego, El

Centro Regional Medical Center,

Valley Childrens Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

PEDIATRICS

ADIGOPULA, BINA, MD

Provider ID: 218149

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6942 UNIVERSITY AVE STE A
LA MESA, CA 91942-5963

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	5565 GROSSMONT CENTER DR STE 2 # 2 LA MESA, CA 91942-3037 <i>Phone:</i> (619) 713-5375 <i>Fax:</i> (619) 713-5379 <i>After Hours Phone:</i> (619) 713-5375 <i>Provider Gender:</i> Male <i>License number:</i> G88047 <i>NPI:</i> 1427049675 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Hospital Affiliation:</i> Marian Regional Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
DUONG, THU A <i>Provider ID:</i> 103010 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942-3037 <i>Phone:</i> (619) 713-5375 <i>Fax:</i> <i>After Hours Phone:</i> (619) 713-5375 <i>Provider Gender:</i> Female <i>License number:</i> A127187 <i>NPI:</i> 1326309881 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	PARKER, PAUL C <i>Provider ID:</i> 276193 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 5555 GROSSMONT CENTER DR LA MESA, CA 91942-3019 <i>Phone:</i> (619) 713-5375 <i>Fax:</i> (619) 713-5379 <i>After Hours Phone:</i> (619) 713-5375 <i>Provider Gender:</i> Male <i>License number:</i> A54747 <i>NPI:</i> 1841202710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	SARWAR, NADIA <i>Provider ID:</i> 257470 <i>Board Certified Specialty:</i> No BLUE SHIELD PROMISE HEALTH PLAN DIRECT 5565 GROSSMONT CENTER DR STE 2 # 2 LA MESA, CA 91942-3037 <i>Phone:</i> (619) 713-5375 <i>Fax:</i> (619) 713-5379 <i>After Hours Phone:</i> (619) 713-5375 <i>Provider Gender:</i> Female <i>License number:</i> C53771 <i>NPI:</i> 1093729022 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Urdu <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>
LANGLEY, GREGORY H <i>Provider ID:</i> 205699 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Blue Shield Promise Health Plan Direct

WANG, EMILY J

Provider ID: 126803
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942-3037
Phone: (619) 713-5375
Fax:
After Hours Phone: (619) 713-5375
Provider Gender: Female
License number: A89393
NPI: 1427142363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PHYSICIANS ASSISTANT

BARKER, SCOTT H

Provider ID: 269071
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5565 GROSSMONT CENTER DR STE 112
LA MESA, CA 91942-3021
Phone: (619) 465-0083
Fax: (619) 465-2267
After Hours Phone: (619) 465-0083
Provider Gender: Male
License number: PA22121
NPI: 1073886289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELO, KRISTIN M , NPA

Provider ID: 241862
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax:
After Hours Phone: (619) 644-3030
Provider Gender: Female
License number: PA19305
NPI: 1164664306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOLM, TYLER A , NPA

Provider ID: 241022
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax:
After Hours Phone: (619) 441-9811
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KEYES, AMY J , NPA

Provider ID: 247011
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

5565 GROSSMONT CENTER
DR STE 101
LA MESA, CA 91942-3021
Phone: (619) 464-3353
Fax:
After Hours Phone: (619)
464-3353
Provider Gender: Female
License number: PA56805
NPI: 1689046310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAYMOND, ALAIN L , NPA
Provider ID: 269057
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 505
LA MESA, CA 91942-3059
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619)
461-3880
Provider Gender: Male
License number: PA21466
NPI: 1164729125
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SACKNOFF, STEFANIE S
Provider ID: 268946
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA51280
NPI: 1720418833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

SUNA SITTO, MOHEEN
Provider ID: 269776
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7051 ALVARADO RD # 101
LA MESA, CA 91942-8901

Phone: (619) 625-1144
Fax:
After Hours Phone: (619)
625-1144
Provider Gender: Female
License number: PA22855
NPI: 1497196729
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WRAY, AMY G
Provider ID: 268840
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619)
644-3030
Provider Gender: Female
License number: PA17578
NPI: 1396762076
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PODIATRIST

COLLINS, MICHAEL L

Provider ID: 108901
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 425-0539
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

VALLONE, MELCHIOR P

Provider ID: 26555
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
5129 GARFIELD ST
LA MESA, CA 91941-5103
Phone: (619) 465-3200
Fax: (619) 465-3700
After Hours Phone: (619)
465-3200
Provider Gender: Male
License number: DPM2201
NPI: 1093998965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PULMONARY DISEASES

AL-NASER, RAED A

Provider ID: 57289
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 461-1920
Fax:
After Hours Phone: (619)
461-1920
Provider Gender: Male
License number: A71932
NPI: 1770589293
Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAGHERI, KAVEH

Provider ID: 57290
Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 713-5014
Fax:
After Hours Phone: (619)
713-5014
Provider Gender: Male
License number: A52496
NPI: 1174542252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

POKALA, SATHYA P

Provider ID: 57292

Board Certified Specialty: No
SAN DIEGO CRITICAL CARE
MED GRP INC

5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 713-5014

Fax:

After Hours Phone: (619)
713-5014

Provider Gender: Male

License number: A51070

NPI: 1972523769

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Phone: (619) 644-4500

Fax: (619) 740-4547

After Hours Phone: (619)
644-4500

Provider Gender: Female

License number: G78635

NPI: 1053348920

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Palomar
Health Downtown Campus,
Sharp Chula Vista Med Ctr,
Sharp Memorial Hospital,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DEWITT, KELLY D , MD

Provider ID: 206385

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619)
740-4500

Provider Gender: Female

License number: A74873

NPI: 1184668741

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Palomar

Health Downtown Campus,

Palomar Medical Center, Sharp

Chula Vista Med Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19/100

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 268785

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 740-4500

Fax: (619) 740-8499

After Hours Phone: (619)
740-4500

Provider Gender: Male

License number: A99269

NPI: 1720314107

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Grossmont
Hospital, Sharp Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

RADIATION ONCOLOGY

COLEMAN, LORI A , MD

Provider ID: 221089

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEJAVAR, SUNANDA M , MD

Provider ID: 221075
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-4500
Fax:
After Hours Phone: (619)
740-4500
Provider Gender: Female
License number: A103733
NPI: 1912232513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kannada, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Sharp Chula Vista Med
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VOLPP, PAUL B , MD

Provider ID: 221104
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019

Phone: (619) 740-4500
Fax:
After Hours Phone: (619)
740-4500
Provider Gender: Male
License number: A86307
NPI: 1225186232
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WEINSTEIN, GEOFFREY D , MD

Provider ID: 220040
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-4500
Fax:
After Hours Phone: (619)
740-4500
Provider Gender: Male
License number: A54109
NPI: 1841233947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Sharp Memorial
Hospital, Palomar Health
Downtown Campus, Sharp Chula
Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

BRANNIGAN, THOMAS J

Provider ID: 114572
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: G65789
NPI: 1598710030
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

BRANNIGAN, THOMAS J

Provider ID: 41347
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: G65789
NPI: 1598710030
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, WEILING

Provider ID: 118293
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Female

License number: A90535
NPI: 1659326460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, HARRY P

Provider ID: 114776
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: G50309
NPI: 1780639039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, HARRY P

Provider ID: 114778
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619)
740-4045
Provider Gender: Male
License number: G50309
NPI: 1780639039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 111122
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619)
740-5100
Provider Gender: Male
License number: A117199

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1760630669

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 111124
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
 Phone: (619) 740-4045
 Fax:
 After Hours Phone: (619)
 740-4045
 Provider Gender: Male
 License number: A117199
 NPI: 1760630669
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

JACOBSEN, JAMES C

Provider ID: 114564
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 740-5100
 Fax:
 After Hours Phone: (619)
 740-5100
 Provider Gender: Male
 License number: A87878
 NPI: 1356394811

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

JACOBSEN, JAMES C

Provider ID: 114567
 Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
 Phone: (619) 740-4045
 Fax:
 After Hours Phone: (619)
 740-4045
 Provider Gender: Male
 License number: A87878
 NPI: 1356394811
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont
 Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LIU, JENNA I

Provider ID: 269009
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER
 DR
 LA MESA, CA 91942-3019
 Phone: (619) 461-1830
 Fax:
 After Hours Phone: (619)
 461-1830
 Provider Gender: Female
 License number: A91263
 NPI: 1952514978
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MOORE, BRIAN S

Provider ID: 115375
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619) 740-4045
Provider Gender: Male
License number: G68336
NPI: 1831144005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T

Provider ID: 113619
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8881 FLETCHER PKWY STE 102
 LA MESA, CA 91942-3129
Phone: (619) 461-1830
Fax: (619) 460-2774
After Hours Phone: (619) 461-1830
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T

Provider ID: 113621
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619) 740-5100
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T

Provider ID: 113622
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax: (619) 460-2774
After Hours Phone: (619) 740-4045
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T , MD

Provider ID: 269664
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8881 FLETCHER PKWY STE 102
 LA MESA, CA 91942-3129
Phone: (619) 461-1830
Fax: (619) 258-8553
After Hours Phone: (619) 461-1830
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NAUMANN, MICHAEL T , MD

Provider ID: 269665
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619) 460-2770
Provider Gender: Female
License number: A116596
NPI: 1386821171
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SUN, ALEX W

Provider ID: 268633
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-4008
Fax:
After Hours Phone: (619) 740-4008
Provider Gender: Male
License number: A133334
NPI: 1538502331
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TROUT, TERE E

Provider ID: 115359
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
Phone: (619) 740-4045
Fax:
After Hours Phone: (619) 740-4045
Provider Gender: Female

License number: G70276
NPI: 1649223140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TROUT, TERE E

Provider ID: 41265
Board Certified Specialty: No
 X RAY MEDICAL GROUP INC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-5100
Fax:
After Hours Phone: (619) 740-5100
Provider Gender: Female
License number: G70276
NPI: 1649223140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

URIOSTE, ALEXANDER S

Provider ID: 114930
Board Certified Specialty: No
X RAY MEDICAL GROUP INC
5555 GROSSMONT CENTER
DR

LA MESA, CA 91942-3019

Phone: (619) 740-5100

Fax:

After Hours Phone: (619)
740-5100

Provider Gender: Male

License number: A78795

NPI: 1528011020

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

URIOSTE, ALEXANDER S

Provider ID: 114936

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

8860 CENTER DR STE 100

LA MESA, CA 91942-7000

Phone: (619) 740-4045

Fax: (619) 460-2774

After Hours Phone: (619)

740-4045

Provider Gender: Male

License number: A78795

NPI: 1528011020

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VENKATESH, VIJAY B

Provider ID: 114938

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 740-5100

Fax:

After Hours Phone: (619)

740-5100

Provider Gender: Male

License number: A94476

NPI: 1689627085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

VENKATESH, VIJAY B

Provider ID: 114942

Board Certified Specialty: No

X RAY MEDICAL GROUP INC

8860 CENTER DR STE 100

LA MESA, CA 91942-7000

Phone: (619) 740-4045

Fax: (619) 668-0377

After Hours Phone: (619)

740-4045

Provider Gender: Male

License number: A94476

NPI: 1689627085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC

MORTEZAIE, ALAN R

Provider ID: 268883

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (661) 326-9600
 Fax:
 After Hours Phone: (661) 326-9600
 Provider Gender: Male
 License number: A116100
 NPI: 1013112820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Bakersfield Memorial Hosp, Mercy Hospital Bakersfield
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

TIEFENBRUN, JONATHAN, MD
 Provider ID: 268966
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 505
 LA MESA, CA 91942-3059
 Phone: (619) 461-3880
 Fax: (619) 461-3895
 After Hours Phone: (619) 461-3880
 Provider Gender: Male
 License number: G85951
 NPI: 1265437727
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RADIOLOGY

BRANNIGAN, THOMAS J
 Provider ID: 269041
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (619) 460-2770
 Fax: (619) 740-5150
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 License number: G65789
 NPI: 1598710030
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHANG, WEILING
 Provider ID: 269040
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
 Phone: (619) 460-2770
 Fax:
 After Hours Phone: (619) 460-2770
 Provider Gender: Female
 License number: A90535
 NPI: 1659326460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ELLISON, HARRY P
 Provider ID: 268985
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5555 GROSSMONT CENTER DR # 1
 LA MESA, CA 91942-3019
 Phone: (619) 740-5100
 Fax: (619) 740-8100
 After Hours Phone: (619) 740-5100
 Provider Gender: Male
 License number: G50309
 NPI: 1780639039
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ELLISON, JON G

Provider ID: 268993
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 460-2774
Fax:
After Hours Phone: (619) 460-2774
Provider Gender: Male
License number: A117199
NPI: 1760630669
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HA, TUAN X

Provider ID: 268900
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (508) 295-7271
Fax:
After Hours Phone: (508) 295-7271
Provider Gender: Male
License number: C131942
NPI: 1285673699
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HONOWITZ, SCOTT C

Provider ID: 268846
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (508) 295-7271
Fax:
After Hours Phone: (508) 295-7271
Provider Gender: Male
License number: A134287
NPI: 1346684156
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter

Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JACOBSEN, JAMES C , MD

Provider ID: 243974
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8881 FLETCHER PKWY STE 102
LA MESA, CA 91942-3129
Phone: (619) 460-2770
Fax: (619) 797-1484
After Hours Phone: (619) 460-2770
Provider Gender: Male
License number: A87878
NPI: 1356394811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JACOBSEN, JAMES C , MD

Provider ID: 243975
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
8860 CENTER DR STE 100
LA MESA, CA 91942-7000
Phone: (619) 460-2770

Fax:

After Hours Phone: (619)
460-2770

Provider Gender: Male

License number: A87878

NPI: 1356394811

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LANCE, VALENTIN A

Provider ID: 268974

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (800) 841-5200

Fax:

After Hours Phone: (800)
841-5200

Provider Gender: Male

License number: A118759

NPI: 1720303191

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD

Provider ID: 243959

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8881 FLETCHER PKWY STE

102

LA MESA, CA 91942-3129

Phone: (619) 460-2770

Fax: (619) 797-1484

After Hours Phone: (619)

460-2770

Provider Gender: Male

License number: G68336

NPI: 1831144005

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD

Provider ID: 243960

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

8860 CENTER DR STE 100

LA MESA, CA 91942-7000

Phone: (619) 460-2770

Fax:

After Hours Phone: (619)

460-2770

Provider Gender: Male

License number: G68336

NPI: 1831144005

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TROUT, TERE E

Provider ID: 268982

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

5555 GROSSMONT CENTER

DR

LA MESA, CA 91942-3019

Phone: (619) 460-2770

Fax: (619) 740-5150

After Hours Phone: (619)

460-2770

Provider Gender: Female

License number: G70276

NPI: 1649223140

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

URIESTE, ALEXANDER S

Provider ID: 269251
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8860 CENTER DR STE 100
 LA MESA, CA 91942-7000
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 License number: A78795
 NPI: 1528011020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VENKATESH, VIJAY B , MD

Provider ID: 269659
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8860 CENTER DR STE 100

LA MESA, CA 91942-7000
 Phone: (619) 740-5100
 Fax: (619) 740-8100
 After Hours Phone: (619) 740-5100
 Provider Gender: Male
 License number: A94476
 NPI: 1689627085
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VENKATESH, VIJAY B , MD

Provider ID: 269660
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8881 FLETCHER PKWY STE 102
 LA MESA, CA 91942-3129
 Phone: (619) 461-1830
 Fax: (619) 460-2774
 After Hours Phone: (619) 461-1830
 Provider Gender: Male
 License number: A94476
 NPI: 1689627085
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RHEUMATOLOGY

KOTHA, AKTHER J

Provider ID: 29099
 Board Certified Specialty: No
 PURUSHOTHAM AND AKTHER KOTHA MD INC
 8860 CENTER DR STE 400
 LA MESA, CA 91942-7003
 Phone: (619) 229-1995
 Fax: (619) 229-1109
 After Hours Phone: (619) 229-1995
 Provider Gender: Female
 License number: A45440
 NPI: 1780609503
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Hindi, Spanish, Telugu, Urdu
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

KOTHA, AKTHER J

Provider ID: 29099

Board Certified Specialty: No

PURUSHOTHAM AND AKTHER
KOTHA MD INC

8860 CENTER DR STE 400
LA MESA, CA 91942-7003

Phone: (619) 229-1995

Fax: (619) 229-1109

After Hours Phone: (619)
229-1995

Provider Gender: Female

License number: A45440

NPI: 1780609503

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Hindi, Spanish, Telugu,
Urdu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KOTHA, ROSHAN, MD

Provider ID: 63454

Board Certified Specialty: No

PURUSHOTHAM AND AKTHER
KOTHA MD INC

8860 CENTER DR STE 400
LA MESA, CA 91942-7003

Phone: (619) 229-1995

Fax: (619) 229-1109

After Hours Phone: (619)

229-1995

Provider Gender: Female

License number: A106044

NPI: 1417117839

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KOTHA, ROSHAN

Provider ID: 63454

Board Certified Specialty: No

PURUSHOTHAM AND AKTHER
KOTHA MD INC

8860 CENTER DR STE 400
LA MESA, CA 91942-7003

Phone: (619) 229-1995

Fax: (619) 229-1109

After Hours Phone: (619)

229-1995

Provider Gender: Female

License number: A106044

NPI: 1417117839

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Spanish, Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SURGERY GENERAL

LIN, HONG-DER

Provider ID: 284965

Board Certified Specialty: No

COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 1 # 221

LA MESA, CA 91942-3000

Phone: (619) 462-8100

Fax: (619) 462-7933

After Hours Phone: (619)

462-8100

Provider Gender: Male

License number: C42964

NPI: 1174539035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Alvarado Hosp Med Ctr,
Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ORR, CARL E , MD

Provider ID: 26549

Board Certified Specialty: No

GROSSMONT SURGICAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ASSOCS A MED CORP
5565 GROSSMONT CENTER
DR STE 221
LA MESA, CA 91942-3022
Phone: (619) 462-8100
Fax: (619) 462-7933
After Hours Phone: (619)
462-8100
Provider Gender: Male
License number: G58899
NPI: 1730195694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew, Mandarin, Russian,
Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY ORTHOPEDIC

ALLSING, STEVEN R , MD
Provider ID: 211762
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5565 GROSSMONT CENTER
DR STE 1 # 112
LA MESA, CA 91942-3000
Phone: (619) 465-0083
Fax: (619) 465-2267
After Hours Phone: (619)
465-0083
Provider Gender: Male
License number: G84903

NPI: 1538274709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BAGHERI, ALI
Provider ID: 125035
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619)
441-9811
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BALLARD, BROOKE L
Provider ID: 262205
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Female
License number: A104161
NPI: 1841447950
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BATES, JAMES E
Provider ID: 262141
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MEDICAL GROUP-SD
8860 CENTER DR STE 350A
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480

Provider Gender: Male
License number: G73930
NPI: 1174692206
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

FINKENBERG, JOHN G

Provider ID: 262200
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Male
License number: G56283
NPI: 1285703413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Scripps Mercy Hospital, Sharp
Coronado Hosp And Healthcare
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

JACOBSON, MARK D

Provider ID: 262261
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Male
License number: G71151
NPI: 1760551915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Sharp Coronado Hosp And
Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

KIMBALL, MICHAEL P , MD

Provider ID: 44005
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (619) 441-9811
Fax: (619) 401-8766
After Hours Phone: (619) 441-9811

Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KIMBALL, MICHAEL P

Provider ID: 44005
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

8851 CENTER DR STE 601
LA MESA, CA 91942-3062

Phone: (619) 441-9811

Fax: (619) 401-8766

After Hours Phone: (619)
441-9811

Provider Gender: Male

License number: G76060

NPI: 1588648653

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista,

Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

RICKARDS, ENASS N

Provider ID: 125036

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

8851 CENTER DR STE 601

LA MESA, CA 91942-3062

Phone: (858) 455-6460

Fax: (619) 401-8766

After Hours Phone: (858)
455-6460

Provider Gender: Female

License number: G79785

NPI: 1609850080

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

RICKARDS, ENASS N , MD

Provider ID: 268907

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 601

LA MESA, CA 91942-3062

Phone: (858) 455-6460

Fax: (619) 401-8766

After Hours Phone: (858)
455-6460

Provider Gender: Female

License number: G79785

NPI: 1609850080

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

ROSENFELD, ALAN L

Provider ID: 262175

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

8851 CENTER DR STE 601

LA MESA, CA 91942-3062

Phone: (858) 455-6460

Fax: (619) 401-8766

After Hours Phone: (858)
455-6460

Provider Gender: Male

License number: G75293

NPI: 1588648968

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps

Memorial Hospital, Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr, Scripps Mercy
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

RYNNING, RALPH E

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 262194
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8860 CENTER DR STE 350
LA MESA, CA 91942-7003
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Male
License number: A103946
NPI: 1952595316
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Norwegian, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

TAYYAB, NEIL A

Provider ID: 262104
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8851 CENTER DR STE 601
LA MESA, CA 91942-3062
Phone: (858) 455-6460
Fax: (619) 401-8766
After Hours Phone: (858) 455-6460

Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SURGERY THORACIC

KOUMJIAN, MICHAEL P

Provider ID: 26527
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5525 GROSSMONT CENTER DR STE 609
LA MESA, CA 91942-3009
Phone: (619) 466-5700
Fax: (619) 460-8975
After Hours Phone: (619) 466-5700
Provider Gender: Male
License number: G37886
NPI: 1366403321
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital, Loma Linda University Med Ctr Murrieta, Alvarado Hospital Llc, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

UROLOGY

DATO, PAUL E , MD

Provider ID: 112527
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619) 697-2456
Provider Gender: Male
License number: A43540
NPI: 1588632715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DATO, PAUL E

Provider ID: 116241
Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (619) 697-2494
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A43540
NPI: 1588632715
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Sharp Grossmont
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KEARSE, WILFRED S

Provider ID: 268850
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033

Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: G83318
NPI: 1144232778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SALMASI, AMIRALI, MD

Provider ID: 129643
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A135118
NPI: 1609187962
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Ucsd Medical Group

SIEGEL, JORDAN A

Provider ID: 101015
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8851 CENTER DR STE 501
LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619)
697-2456
Provider Gender: Male
License number: A110507
NPI: 1275865958
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Paradise Valley
Hospital, Sharp Chula Vista Med
Ctr, Scripps Green Hospital,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TANAGHO, YOUSSEF, MD

Provider ID: 124747

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 8851 CENTER DR STE 501
 LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619) 697-2456
Provider Gender: Male
License number: A125924
NPI: 1003029372
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French
Cultural Competency: No
Hospital Affiliation: Eisenhower Medical Ctr, John F Kennedy Memorial Hosp, Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TANAGHO, YOUSSEF

Provider ID: 125197
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 8851 CENTER DR STE 501
 LA MESA, CA 91942-3033
Phone: (619) 697-2456
Fax:
After Hours Phone: (619) 697-2456
Provider Gender: Male
License number: A125924
NPI: 1003029372

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French
Cultural Competency: No
Hospital Affiliation: Eisenhower Medical Ctr, John F Kennedy Memorial Hosp, Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LAKESIDE

CHIROPRACTOR

HOURIHAN, KEITH M

Provider ID: 257549
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Provider Gender: Male
License number: DC29314
NPI: 1306916994
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

FAMILY PRACTICE

MARSHALL, LARRY J

Provider ID: 37825
Board Certified Specialty: No
LARRY J MARSHALL MD
 12517 LAKESHORE DR
 LAKESIDE, CA 92040-3103
Phone: (619) 443-3843
Fax: (619) 390-1810
After Hours Phone: (619) 443-3843
Provider Gender: Male
License number: A52344
NPI: 1114018132
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PREVENTATIVE MEDICINE GENERAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MANNINO, ELIZABETH A

Provider ID: 24748
Board Certified Specialty: No
NEIGHBORHOOD
HEALTHCARE LAKESIDE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax:
After Hours Phone: (858) 218-3000
Provider Gender: Female
License number: A43914
NPI: 1548290463
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Neighborhood Healthcare Lakeside
IPA:

LEMON GROVE

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA R

Provider ID: 107200
Board Certified Specialty: No
**LEMON GROVE FAMILY
HEALTH CENTER**
 7592 BROADWAY

LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Female
License number: NP95001050
NPI: 1578993788
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 63465
Board Certified Specialty: No
**LEMON GROVE FAMILY
HEALTH CENTER**
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Female
License number: A107323
NPI: 1629289400
Provider English Spoken: Yes
Provider Language(s) Spoken:

Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI A

Provider ID: 114835
Board Certified Specialty: No
**FAMILY HLTH CTR SAN
DIEGO-LEMON GROVE**
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA

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D. Directorio de proveedores de atención especializada

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove
Family Health Center

IPA:

BUECHNER, CHARLENE A

Provider ID: 127442

Board Certified Specialty: No
LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove
Family Health Center

IPA:

CARTER, KHALIL J

Provider ID: 127379

Board Certified Specialty: No

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Provider Gender: Male

License number: A113001

NPI: 1225231582

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove
Family Health Center

IPA:

CERVANTES, SANDRA M

Provider ID: 114878

Board Certified Specialty: No

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, T

Hours: M-F 9AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s): Lemon Grove
Family Health Center

IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120516

Board Certified Specialty: No

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2550

Fax:

After Hours Phone: (619)

515-2550

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

LIPSCHITZ, LISA S

Provider ID: 115430
Board Certified Specialty: No
LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115047
Board Certified Specialty: No
LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

RODRIGUEZ JEREZ,

ROBERTO D

Provider ID: 130081
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-LEMON GROVE
 7592 BROADWAY
 LEMON GROVE, CA 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

WINESBURG, JENNIFER J

Provider ID: 114810
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-LEMON GROVE
 7592 BROADWAY
 LEMON GROVE, CA 91945-1604

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D. Directorio de proveedores de atención especializada

Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Desert Regional Med Ctr, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

ZIEG, ALAN J

Provider ID: 114833
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-LEMON GROVE
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2500
Fax:
After Hours Phone: (619) 515-2500
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

PHYSICIANS ASSISTANT

FLEMING, DAVID E

Provider ID: 115067
Board Certified Specialty: No
 LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2550
Fax:
After Hours Phone: (619) 515-2550
Provider Gender: Male
License number: PA12416
NPI: 1932329505
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: P, EB, IB, E, T
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): Lemon Grove Family Health Center
IPA:

NATIONAL CITY

ANESTHESIOLOGY PAIN MANAGEMENT

WYNN, BRENTON D , MD

Provider ID: 268987
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 502 EUCLID AVE STE 200
 NATIONAL CITY, CA
 91950-2984
Phone: (619) 434-4019
Fax: (877) 264-8373
After Hours Phone: (619) 434-4019
Provider Gender: Male
License number: A73257
NPI: 1528069820
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CARDIOLOGY	<i>Phone:</i> (619) 474-2233 <i>Fax:</i> (619) 474-2211 <i>After Hours Phone:</i> (619) 474-2233	Medical Center, Oak Valley Dist Hosp <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No
CAMACHO, BENJAMIN O , MD <i>Provider ID:</i> 269129 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 1615 SWEETWATER RD NATIONAL CITY, CA 91950-7655 <i>Phone:</i> (619) 474-2233 <i>Fax:</i> (619) 474-2211 <i>After Hours Phone:</i> (619) 474-2233 <i>Provider Gender:</i> Male <i>License number:</i> A52660 <i>NPI:</i> 1699759936 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Provider Gender:</i> Male <i>License number:</i> A52660 <i>NPI:</i> 1699759936 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc
CAMACHO, BENJAMIN O <i>Provider ID:</i> 35045 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 1615 SWEETWATER RD NATIONAL CITY, CA 91950-7655	DUBEY, RAJESH K <i>Provider ID:</i> 269343 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 610 EUCLID AVE STE 302 NATIONAL CITY, CA 91950-2953 <i>Phone:</i> (209) 521-9661 <i>Fax:</i> <i>After Hours Phone:</i> (209) 521-9661 <i>Provider Gender:</i> Male <i>License number:</i> A83527 <i>NPI:</i> 1225011299 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Bengali, Hindi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Doctors	FERNANDEZ, GENARO C , MD <i>Provider ID:</i> 121669 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 610 EUCLID AVE STE 201 NATIONAL CITY, CA 91950-2952 <i>Phone:</i> (619) 267-8181 <i>Fax:</i> (619) 479-6750 <i>After Hours Phone:</i> (619) 267-8181 <i>Provider Gender:</i> Male <i>License number:</i> A45754 <i>NPI:</i> 1871504498 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

FERNANDEZ, GENARO, MD

Provider ID: 268889
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
610 EUCLID AVE STE 201
NATIONAL CITY, CA
91950-2952
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619)
267-8181
Provider Gender: Male
License number: A122302
NPI: 1073768891
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Italian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital, Sharp Chula
Vista Med Ctr, Scripps Memorial
Hospital, Grossmont Hospital,
Alvarado Hosp Med Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FERNANDEZ, GENARO C

Provider ID: 27197
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

610 EUCLID AVE STE 201
NATIONAL CITY, CA
91950-2952
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619)
267-8181
Provider Gender: Male
License number: A45754
NPI: 1871504498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital, Paradise Valley
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NANAVATI, VIMAL I

Provider ID: 269553
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2345 E 8TH ST STE 111
NATIONAL CITY, CA
91950-2861
Phone: (619) 585-0476
Fax: (619) 732-0030
After Hours Phone: (619)
585-0476
Provider Gender: Male
License number: G83522

NPI: 1851408082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Community Hospital, Paradise
Valley Hospital, Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OVIEDO-LINARES, RAUL, MD

Provider ID: 269140
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
502 EUCLID AVE STE 104
NATIONAL CITY, CA
91950-2959
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619)
434-4288
Provider Gender: Male
License number: A76050
NPI: 1972533941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	1615 SWEETWATER RD STE D NATIONAL CITY, CA 91950-7655 <i>Phone:</i> (619) 474-2233 <i>Fax:</i> (619) 474-2211 <i>After Hours Phone:</i> (619) 474-2233 <i>Provider Gender:</i> Male <i>License number:</i> A124001 <i>NPI:</i> 1386821460 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No	<i>NPI:</i> 1386821460 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No
PANDHI, JAY N , MD <i>Provider ID:</i> 269087 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 208 NATIONAL CITY, CA 91950-2969 <i>Phone:</i> (619) 512-1915 <i>Fax:</i> (619) 512-1913 <i>After Hours Phone:</i> (619) 512-1915 <i>Provider Gender:</i> Male <i>License number:</i> C56015 <i>NPI:</i> 1407997406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No	♿ <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	WYSOCZANSKI, MARIUSZ W <i>Provider ID:</i> 78417 <i>Board Certified Specialty:</i> No HEART HEALTH CENTER OF SAN DIEGO A MEDICAL CORPORATION 502 EUCLID AVE STE 104 NATIONAL CITY, CA 91950-2959 <i>Phone:</i> (619) 434-4288 <i>Fax:</i> (619) 434-4315 <i>After Hours Phone:</i> (619) 434-4288 <i>Provider Gender:</i> Male <i>License number:</i> C55986 <i>NPI:</i> 1659535656 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Polish, Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes
ROUGH, STEVEN J , MD <i>Provider ID:</i> 269349 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC	ROUGH, STEVEN J , MD <i>Provider ID:</i> 269350 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 502 EUCLID AVE STE 104 NATIONAL CITY, CA 91950-2959 <i>Phone:</i> (619) 434-4288 <i>Fax:</i> (619) 434-4315 <i>After Hours Phone:</i> (619) 434-4288 <i>Provider Gender:</i> Male <i>License number:</i> A124001	

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROUGH, STEVEN J
 Provider ID: 262117
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 502 EUCLID AVE STE 104
 NATIONAL CITY, CA
 91950-2959

Phone: (619) 434-4288
 Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
 Provider Gender: Male
 License number: A124001
 NPI: 1386821460
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROUGH, STEVEN J
 Provider ID: 80909
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD
 1615 SWEETWATER RD STE D
 NATIONAL CITY, CA
 91950-7655
 Phone: (619) 474-2233
 Fax: (619) 474-2211
 After Hours Phone: (619) 474-2233
 Provider Gender: Male
 License number: A124001
 NPI: 1386821460
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hosp Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

WYSOCZANSKI, MARIUSZ W
 Provider ID: 78417
 Board Certified Specialty: No
 HEART HEALTH CENTER OF SAN DIEGO A MEDICAL CORPORATION
 502 EUCLID AVE STE 104
 NATIONAL CITY, CA
 91950-2959

CARDIOVASCULAR DISEASE

OVIEDO-LINARES, RAUL
 Provider ID: 125051
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 502 EUCLID AVE STE 104
 NATIONAL CITY, CA
 91950-2959
 Phone: (619) 434-4288
 Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
 Provider Gender: Male
 License number: A76050
 NPI: 1972533941
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Polish, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/100
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 434-4288
 Fax:
 After Hours Phone: (619) 434-4288
 Provider Gender: Male
 License number: C55986
 NPI: 1659535656
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Polish, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO V
 Provider ID: 244332
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2101 GRANGER AVE # 101A
 NATIONAL CITY, CA
 91950-6208
 Phone: (844) 200-2426
 Fax: (619) 434-9853
 After Hours Phone: (844) 200-2426
 Provider Gender: Male
 License number: NP22974
 NPI: 1356684781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

AQUINO, FELINO V
 Provider ID: 244335
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
 Phone: (844) 200-2426
 Fax: (619) 474-3919
 After Hours Phone: (844) 200-2426
 Provider Gender: Male
 License number: NP22974
 NPI: 1356684781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

AQUINO, FELINO V

Provider ID: 98698
 Board Certified Specialty: No
 OPERATION SAMAHAN INC
 2743 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-7410
 Phone: (619) 474-2284
 Fax:
 After Hours Phone: (619) 474-2284
 Provider Gender: Male
 License number: NP22974
 NPI: 1356684781
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BERNARDO-GREGORY, ELSIE S , NPA
 Provider ID: 244833
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2835 HIGHLAND AVE STE B
 NATIONAL CITY, CA
 91950-7406
 Phone: (844) 200-2426
 Fax: (619) 477-2628
 After Hours Phone: (844) 200-2426
 Provider Gender: Female
 License number: NP15257
 NPI: 1588808349
 Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DACANAY-HERMAN, ROWENA S

Provider ID: 127238
Board Certified Specialty: No
OPERATION SAMAHAN -
NATIONAL C
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Provider Gender: Female
License number: NP22378
NPI: 1144689175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8AM-6PM, F
8AM-5PM, SA 9AM-5PM
Website:
www.operationsamahan.org

Email:
Medical Group(s): Operation
Samahan - National C
IPA:
KHAN, MATTHEW P
Provider ID: 238376
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1428 HIGHLAND AVE
NATIONAL CITY, CA
91950-4624
Phone: (619) 474-2284
Fax:
After Hours Phone: (619)
474-2284
Provider Gender: Male
License number: NP17838
NPI: 1942456124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

After Hours Phone: (619)
474-2284
Provider Gender: Male
License number: NP17838
NPI: 1942456124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LIM, IMELDA B

Provider ID: 116924
Board Certified Specialty: No
OPERATION SAMAHAN INC
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426

Provider Gender: Female
License number: NP95000203
NPI: 1093130395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MACARIOLA, AMPARO E

Provider ID: 99315
Board Certified Specialty: No
OPERATION SAMAHAN INC
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (619) 474-2284
Fax:
After Hours Phone: (619)
474-2284
Provider Gender: Female
License number: NP95001709
NPI: 1932505401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> REAL, MARIA F <i>Provider ID:</i> 105583 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518 <i>Phone:</i> (619) 434-7308 <i>Fax:</i> <i>After Hours Phone:</i> (619) 434-7308 <i>Provider Gender:</i> Female <i>License number:</i> NP17328 <i>NPI:</i> 1548450471 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-W,F,SA 9AM-5PM, TH 8AM-2PM <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medical Group(s):</i> La Maestra Family Clinic Inc <i>IPA:</i> REID, EMILY <i>Provider ID:</i> 107174 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518	<i>Phone:</i> (619) 434-7308 <i>Fax:</i> <i>After Hours Phone:</i> (619) 434-7308 <i>Provider Gender:</i> Female <i>License number:</i> NP95002766 <i>NPI:</i> 1083081467 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-W,F,SA 9AM-5PM, TH 8AM-2PM <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medical Group(s):</i> La Maestra Family Clinic Inc <i>IPA:</i> WILLIAMS, BREAUNA A <i>Provider ID:</i> 115127 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518 <i>Phone:</i> (619) 434-7308 <i>Fax:</i> <i>After Hours Phone:</i> (619) 434-7308 <i>Provider Gender:</i> Female <i>License number:</i> NP95001840 <i>NPI:</i> 1063884864 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i>	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, W <i>Hours:</i> M-W,F,SA 9AM-5PM, TH 8AM-2PM <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medical Group(s):</i> La Maestra Family Clinic Inc <i>IPA:</i> DERMATOLOGY BROGAN, JACQUELINE L , MD <i>Provider ID:</i> 265250 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 <i>Phone:</i> (619) 267-8303 <i>Fax:</i> (619) 267-4835 <i>After Hours Phone:</i> (619) 267-8303 <i>Provider Gender:</i> Female <i>License number:</i> A160890 <i>NPI:</i> 1801273479 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
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D. Directorio de proveedores de atención especializada

CELANO, NICHOLAS J

Provider ID: 102706
Board Certified Specialty: Yes
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CELANO, NICHOLAS J

Provider ID: 102706
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978

Phone: (619) 267-8303
Fax:
After Hours Phone: (619)
267-8303
Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CELANO, NICHOLAS J , MD

Provider ID: 269115
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619)
267-8303
Provider Gender: Male
License number: A120411
NPI: 1457662264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CHIANG, JENNIFER Y

Provider ID: 107662
Board Certified Specialty: No
WILLIAM F RESH MD SKIN
AND SKIN CANCER MED GRP
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978
Phone: (619) 267-8303
Fax:
After Hours Phone: (619)
267-8303
Provider Gender: Female
License number: A120528
NPI: 1457656738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CHIANG, JENNIFER Y

Provider ID: 262273
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 401
NATIONAL CITY, CA
91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

License number: A120528

NPI: 1457656738

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CHIANG, JENNIFER Y , MD

Provider ID: 269157

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

License number: A120528

NPI: 1457656738

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

CROWLEY, CHRISTOPHER S , MD

Provider ID: 269667

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Male

License number: A134188

NPI: 1962836783

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Paradise

Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NELSON, AISLYN M , MD

Provider ID: 246490

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 401

NATIONAL CITY, CA

91950-2978

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

License number: A147913

NPI: 1154717288

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RESH, WILLIAM F

Provider ID: 124997

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RESH, WILLIAM F , MD

Provider ID: 269100
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RESH, WILLIAM F

Provider ID: 66264
Board Certified Specialty: No
WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Male
License number: C34661
NPI: 1154309862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SATEESH, BROOKE R

Provider ID: 124998
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978
Phone: (619) 267-8303
Fax: (619) 267-4835
After Hours Phone: (619) 267-8303
Provider Gender: Female
License number: A109670
NPI: 1164565339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SATEESH, BROOKE R , MD

Provider ID: 269155
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 401

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NATIONAL CITY, CA 91950-2978 Phone: (619) 267-8303 Fax: (619) 267-4835 After Hours Phone: (619) 267-8303 Provider Gender: Female License number: A109670 NPI: 1164565339 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	No Accessibility: W Hours: M-F 8:30AM-4:30PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
SATEESH, BROOKE R Provider ID: 46267 Board Certified Specialty: No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 Phone: (619) 267-8303 Fax: After Hours Phone: (619) 267-8303 Provider Gender: Female License number: A109670 NPI: 1164565339	UEBELHOER, NATHAN S Provider ID: 125008 Board Certified Specialty: No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 Phone: (619) 267-8303 Fax: After Hours Phone: (619) 267-8303 Provider Gender: Male License number: 20A9328 NPI: 1659344513 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Naval Medical Ctr Sd Rbe Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	UEBELHOER, NATHAN S Provider ID: 125008 Board Certified Specialty: No WILLIAM F RESH MD SKIN AND SKIN CANCER MED GRP 655 EUCLID AVE STE 401 NATIONAL CITY, CA 91950-2978 Phone: (619) 267-8303 Fax: (619) 428-4835 After Hours Phone: (619) 267-8303 Provider Gender: Male License number: 20A9328 NPI: 1659344513 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Naval Medical Ctr Sd Rbe Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
	UEBELHOER, NATHAN S , MD	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 269137
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 401
 NATIONAL CITY, CA
 91950-2978

Phone: (619) 267-8303

Fax: (619) 428-4835

After Hours Phone: (619)
 267-8303

Provider Gender: Male

License number: 20A9328

NPI: 1659344513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Naval Medical
 Ctr Sd Rbe

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
 No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FAMILY PRACTICE

BAEZ, BEATRICE E

Provider ID: 47984

Board Certified Specialty: No
 OPERATION SAMAHAN -
 NATIONAL C

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Provider Gender: Female

License number: A74777

NPI: 1245372507

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
 No

Accessibility: W

Hours: M-TH 8AM-6PM, F

8AM-5PM, SA 9AM-5PM

Website:

www.operationsamahan.org

Email:

Medical Group(s): Operation

Samahan - National C

IPA:

MOYA, MARY R

Provider ID: 118066

Board Certified Specialty: No
 OPERATION SAMAHAN INC

2835 HIGHLAND AVE STE A

NATIONAL CITY, CA

91950-7406

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)

200-2426

Provider Gender: Female

License number: A80185

NPI: 1093844417

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

INTERNAL MEDICINE

WYSOCZANSKI, MARIUSZ W , MD

Provider ID: 269007

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

502 EUCLID AVE STE 104

NATIONAL CITY, CA

91950-2959

Phone: (619) 434-4288

Fax: (619) 434-4315

After Hours Phone: (619)

434-4288

Provider Gender: Male

License number: C55986

NPI: 1659535656

Provider English Spoken: Yes

Provider Language(s) Spoken:

Polish, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NEPHROLOGY	NATIONAL CITY, CA 91950-2975 Phone: (619) 475-4900 Fax: After Hours Phone: (619) 475-4900 Provider Gender: Male License number: C143845 NPI: 1366626467 Provider English Spoken: Yes Provider Language(s) Spoken: German, Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: www.balboacare.com Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Provider English Spoken: Yes Provider Language(s) Spoken: German, Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
CALDERON MOLINA, JUAN S , MD Provider ID: 109336 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 Phone: (619) 585-4370 Fax: (619) 585-4033 After Hours Phone: (619) 585-4370 Provider Gender: Male License number: C143845 NPI: 1366626467 Provider English Spoken: Yes Provider Language(s) Spoken: German, Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	CALDERON MOLINA, JUAN S Provider ID: 262118 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 Phone: (619) 585-4370 Fax: (619) 585-4033 After Hours Phone: (619) 585-4370 Provider Gender: Male License number: C143845 NPI: 1366626467	MAA CHIP, FHARAK Provider ID: 262271 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 Phone: (619) 475-4900 Fax: (619) 475-8373 After Hours Phone: (619) 475-4900 Provider Gender: Male License number: A117604 NPI: 1245518414 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999
CALDERON MOLINA, JUAN S Provider ID: 109336 Board Certified Specialty: No BALBOA NEPHROLOGY MED GRP INC 655 EUCLID AVE STE 303	CALDERON MOLINA, JUAN S Provider ID: 262118 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 Phone: (619) 585-4370 Fax: (619) 585-4033 After Hours Phone: (619) 585-4370 Provider Gender: Male License number: C143845 NPI: 1366626467	MAA CHIP, FHARAK Provider ID: 262271 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 Phone: (619) 475-4900 Fax: (619) 475-8373 After Hours Phone: (619) 475-4900 Provider Gender: Male License number: A117604 NPI: 1245518414 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> MAA CHIP, FHARAK <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Group-Sd MAA CHIP, FHARAK, MD <i>Provider ID:</i> 84000 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 <i>Phone:</i> (619) 475-4900 <i>Fax:</i> (619) 475-8373 <i>After Hours Phone:</i> (619) 475-4900 <i>Provider Gender:</i> Male <i>License number:</i> A117604 <i>NPI:</i> 1245518414 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	NATIONAL CITY, CA 91950-2975 <i>Phone:</i> (619) 475-4900 <i>Fax:</i> (619) 475-8373 <i>After Hours Phone:</i> (619) 475-4900 <i>Provider Gender:</i> Male <i>License number:</i> A62631 <i>NPI:</i> 1407851041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
MAA CHIP, FHARAK <i>Provider ID:</i> 84000 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 <i>Phone:</i> (619) 475-4900 <i>Fax:</i> <i>After Hours Phone:</i> (619) 475-4900 <i>Provider Gender:</i> Male <i>License number:</i> A117604 <i>NPI:</i> 1245518414 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.balboacare.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical	SACAMAY, TAGUMPAY E <i>Provider ID:</i> 262201 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 655 EUCLID AVE STE 303	SACAMAY, TAGUMPAY E <i>Provider ID:</i> 267110 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 655 EUCLID AVE STE 303 NATIONAL CITY, CA 91950-2975 <i>Phone:</i> (619) 475-4900 <i>Fax:</i> (619) 267-6644 <i>After Hours Phone:</i> (619) 475-4900 <i>Provider Gender:</i> Male <i>License number:</i> A62631 <i>NPI:</i> 1407851041

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website: www.balboacare.com

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SACAMAY, TAGUMPAY E , MD

Provider ID: 26710

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

655 EUCLID AVE STE 303
 NATIONAL CITY, CA
 91950-2975

Phone: (619) 475-4900

Fax: (619) 475-8373

After Hours Phone: (619) 475-4900

Provider Gender: Male

License number: A62631

NPI: 1407851041

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN R

Provider ID: 206092

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

502 EUCLID AVE STE 300
 NATIONAL CITY, CA
 91950-2950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619) 475-1261

Provider Gender: Female

License number: A113471

NPI: 1255643474

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

DEL ROSARIO, GELEN R

Provider ID: 257478

Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 502 EUCLID AVE STE 300
 NATIONAL CITY, CA
 91950-2950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619) 475-1261

Provider Gender: Female

License number: A113471

NPI: 1255643474

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

DEL ROSARIO, GELEN R , MD

Provider ID: 269247

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 502 EUCLID AVE STE 300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NATIONAL CITY, CA
91950-2950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
License number: A113471
NPI: 1255643474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Rady Childrens Health Network

HARDER, ELMER W
Provider ID: 26687
Board Certified Specialty: No
SOUTH BAY OB GYN MED GRP INC
655 EUCLID AVE STE 409
NATIONAL CITY, CA
91950-2981
Phone: (619) 267-8313
Fax:
After Hours Phone: (619) 267-8313
Provider Gender: Male
License number: A38000
NPI: 1215014428
Provider English Spoken: Yes

Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Paradise Valley Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-TH 8:30AM-5:30PM, F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WANG, AI WEI
Provider ID: 26930
Board Certified Specialty: No
SOUTH BAY OB GYN MED GRP INC
655 EUCLID AVE STE 409
NATIONAL CITY, CA
91950-2981
Phone: (619) 267-8313
Fax: (619) 472-2008
After Hours Phone: (619) 267-8313
Provider Gender: Male
License number: A91882
NPI: 1548339534
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W

Hours: M-TH 8:30AM-5:30PM, F 8:30AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OPHTHALMOLOGY

ABDALLAH, WALID F , MD
Provider ID: 266063
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A146829
NPI: 1871912717
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Korean, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital Los Angeles, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARRABY, ARNETT, MD
Provider ID: 268383
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Male

License number: G47836

NPI: 1366530792

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: El Centro

Regional Medical Center,

Pioneers Memorial Hospital,

Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CHANG, TOM S , MD

Provider ID: 270365

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2240 E PLAZA BLVD STE F G

NATIONAL CITY, CA

91950-5165

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

License number: A69909

NPI: 1609848969

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cantonese

Cultural Competency: No

Hospital Affiliation: San Gabriel

Valley Med Ctr, Providence Little

Co Of Mary Med Ctr Torrance,

Methodist Hosp Of Southern

California, Hollywood

Presbyterian Med Ctr, Desert

Regional Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ECHEGOYEN, JULIO C , MD

Provider ID: 268352

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

1520 E PLAZA BLVD

NATIONAL CITY, CA

91950-3616

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)

425-7755

Provider Gender: Male

License number: A121431

NPI: 1770801540

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, Paradise Valley

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GOLLOGLY, HEIDRUN E

Provider ID: 125022

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

655 EUCLID AVE STE 302

NATIONAL CITY, CA

91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Provider Gender: Female

License number: A134761

NPI: 1477879823

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Adventist

Health And Rideout, Grossmont

Hospital, Desert Regional Med

Ctr, Paradise Valley Hospital,

Scripps Mercy Hospital, Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

GOLLOGLY, HEIDRUN E , MD

Provider ID: 269126
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, German, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Adventist
Health And Rideout, Grossmont
Hospital, Desert Regional Med
Ctr, Paradise Valley Hospital,
Scripps Mercy Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

HAIGHT, BRUCE T , MD

Provider ID: 269113

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KHANDAN, SARA, MD

Provider ID: 268351
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
License number: A155828
NPI: 1063850808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Hemet Valley
Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KOWNACKI, JOHN

Provider ID: 262427
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: G84672
NPI: 1225189418
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MANI, MAJID, MD

Provider ID: 268295
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A60640
NPI: 1043261373
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Sharp Memorial Hospital, Pioneers Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MANI, NASRIN, MD

Provider ID: 269201
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
License number: A40473
NPI: 1023061314
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCGRAW, JOSEPH P , MD

Provider ID: 269700
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619) 470-2700
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCGRAW, JOSEPH P , MD

Provider ID: 269701
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619) 470-2700
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262444
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2240 E PLAZA BLVD STE G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MILLER, DOUGLAS G

Provider ID: 262445
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: G52627
NPI: 1982636031

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268954
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE G
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 268955
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA
91950-5165
Phone: (619) 470-2700
Fax: (619) 236-7822
After Hours Phone: (619)
470-2700
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MONTGOMERY, GORDON J

Provider ID: 39865
Board Certified Specialty: No
PRECISION EYE CAREA MED
CORP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973

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D. Directorio de proveedores de atención especializada

Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: G31591
NPI: 1144226234
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 108014
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS
 2240 E PLAZA BLVD STE F AND G
 NATIONAL CITY, CA
 91950-5165
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 121358
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 5/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MORRISON-REYES, JOSHUA A

Provider ID: 262324
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 2220 E PLAZA BLVD STE H
 NATIONAL CITY, CA
 91950-5162
Phone: (619) 470-2700
Fax:
After Hours Phone: (619) 470-2700
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269180
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MORRISON-REYES, JOSHUA A , MD

Provider ID: 269181
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA
91950-5165
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619)
697-4600
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial
Hospital, Sharp Memorial
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MOSS, JASON M , MD

Provider ID: 268290
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A130529

NPI: 1386961423
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Scripps
Memorial Hospital, Sharp Chula
Vista Med Ctr, Sharp Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PAPASTERGIOU, GEORGIOS, MD

Provider ID: 268327
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A127706
NPI: 1790054393
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Farsi, French, Greek,
Italian, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Scripps
Memorial Hospital, Sharp

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PATEL, GITANE, MD Provider ID: 268742 Board Certified Specialty: No COMMUNITY CARE IPA LLC 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 Phone: (619) 470-2700 Fax: (619) 697-2410 After Hours Phone: (619) 470-2700 Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PATEL, SARJAN H , MD Provider ID: 268800 Board Certified Specialty: No COMMUNITY CARE IPA LLC 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165	Provider ID: 262404 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A114976 NPI: 1316199326 Provider English Spoken: Yes Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
PATEL, GITANE Provider ID: 262320 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 Phone: (619) 470-2700 Fax: (619) 697-2410 After Hours Phone: (619) 470-2700 Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM	PATEL, SARJAN H	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A114976 NPI: 1316199326 Provider English Spoken: Yes Provider Language(s) Spoken: Gujarati, Hindi, Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Alvarado Hospital, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Arabic, Spanish Cultural Competency: No Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
PEAIRS, JAMES J , MD Provider ID: 268366 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1520 E PLAZA BLVD NATIONAL CITY, CA 91950-3616 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A155296 NPI: 1609135623 Provider English Spoken: Yes Provider Language(s) Spoken:	PONS, MAURICIO E , MD Provider ID: 268353 Board Certified Specialty: No COMMUNITY CARE IPA LLC 1520 E PLAZA BLVD NATIONAL CITY, CA 91950-3616 Phone: (619) 425-7755 Fax: (619) 425-2138 After Hours Phone: (619) 425-7755 Provider Gender: Male License number: A87650 NPI: 1376723759 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, El Centro Regional Medical Center, Sharp Memorial Hospital, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No	PRABHU, SUJATA P Provider ID: 262394 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 2240 E PLAZA BLVD STE F AND G NATIONAL CITY, CA 91950-5165 Phone: (619) 470-2700 Fax: (619) 697-2410 After Hours Phone: (619) 470-2700 Provider Gender: Female License number: A115965 NPI: 1982872552 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

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D. Directorio de proveedores de atención especializada

PRABHU, SUJATA P

Provider ID: 262397
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268921
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2240 E PLAZA BLVD STE F AND G

NATIONAL CITY, CA
 91950-5165
Phone: (619) 470-2700
Fax: (619) 697-2410
After Hours Phone: (619) 470-2700
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RAJSBAUM, MARTIN, MD

Provider ID: 268294
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1520 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Male
License number: A42670

NPI: 1912999400
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RICE, LAWRENCE S

Provider ID: 262226
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Rady Childrens Hospital San Diego

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

RICE, LAWRENCE S , MD
Provider ID: 269039
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical
Group-Sd

SASSANI, PATRICK P , MD
Provider ID: 268285
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A150205
NPI: 1033411061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp Chula
Vista Med Ctr, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKAF, AYHAM R , MD
Provider ID: 268279
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1520 E PLAZA BLVD
NATIONAL CITY, CA
91950-3616

Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Male
License number: A120584
NPI: 1285888628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro
Regional Medical Center, Sharp
Memorial Hospital, Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TREGER, PAUL L
Provider ID: 262420
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
472-1010
Provider Gender: Male
License number: G26803
NPI: 1447311899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont

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D. Directorio de proveedores de atención especializada

Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

TREGER, PAUL L , MD

Provider ID: 268812
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
 472-1010
Provider Gender: Male
License number: G26803
NPI: 1447311899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
 Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

WAINESS, REID M , MD

Provider ID: 254760
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2240 E PLAZA BLVD STE F
 NATIONAL CITY, CA
 91950-5165
Phone: (800) 898-2020
Fax:
After Hours Phone: (800)
 898-2020
Provider Gender: Male
License number: A108766
NPI: 1396935979
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Armenian, Cantonese, Hebrew,
 Korean, Mandarin, Spanish,
 Vietnamese
Cultural Competency: No
Hospital Affiliation: San Gabriel
 Valley Med Ctr, Desert Regional
 Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 5/99
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

WASSERSTROM, JEFFREY P , MD

Provider ID: 129187
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973

Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
 472-1010
Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

WASSERSTROM, JEFFREY P

Provider ID: 262174
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619)
 472-1010
Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I

Provider ID: 262169

Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Provider Gender: Male

License number: A154697

NPI: 1346687233

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I , MD

Provider ID: 269121

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Provider Gender: Male

License number: A154697

NPI: 1346687233

Provider English Spoken: Yes

Provider Language(s) Spoken: Arabic

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PEDIATRICS

BAILONY, MOHAMMED T

Provider ID: 274980

Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 655 EUCLID AVE STE 205
 NATIONAL CITY, CA
 91950-2967

Phone: (619) 470-1945

Fax: (619) 475-5048

After Hours Phone: (619) 470-1945

Provider Gender: Male

License number: A34406

NPI: 1376625913

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LERIAS, NICHOLAS P

Provider ID: 130009

Board Certified Specialty: No
 OPERATION SAMAHAN INC
 2835 HIGHLAND AVE STE A
 NATIONAL CITY, CA
 91950-7406

Phone: (844) 200-2426

Fax:

After Hours Phone: (844) 200-2426

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: 20A14561
 NPI: 1952749301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PHYSICIANS ASSISTANT

MACASADIA, MARITES N
 Provider ID: 268787
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 610 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2953
 Phone: (619) 527-7700
 Fax: (619) 527-3226
 After Hours Phone: (619)
 527-7700
 Provider Gender: Female
 License number: PA15254
 NPI: 1093743015
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc

PODIATRIST

AHMED, AISHA
 Provider ID: 243131
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1428 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-4624
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844)
 200-2426
 Provider Gender: Female
 License number: DPM5369
 NPI: 1316326382
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Spanish, Urdu
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital, Scripps Mercy
 Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ATMAR, AKMAL
 Provider ID: 269784
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2345 E 8TH ST STE 105
 NATIONAL CITY, CA
 91950-2866

Phone: (929) 287-4511
 Fax: (877) 671-6835
 After Hours Phone: (929)
 287-4511
 Provider Gender: Male
 License number: DPM5295
 NPI: 1558656637
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Persian, Urdu
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHISHOLM, JOHN A
 Provider ID: 121607
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 610 EUCLID AVE STE 301
 NATIONAL CITY, CA
 91950-2953
 Phone: (619) 292-2493
 Fax: (619) 618-0222
 After Hours Phone: (619)
 292-2493
 Provider Gender: Male
 License number: DPM3431
 NPI: 1396740072
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Paradise
 Valley Hospital, Scripps Mercy
 Hospital Chula Vista, Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

CHISHOLM, JOHN A

Provider ID: 268441
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 610 EUCLID AVE STE 301
 NATIONAL CITY, CA
 91950-2953
Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619)
 292-2493
Provider Gender: Male
License number: DPM3431
NPI: 1396740072
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise
 Valley Hospital, Scripps Mercy
 Hospital Chula Vista, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

DAVIDSON, JOHN A

Provider ID: 129542
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 610 EUCLID AVE STE 301
 NATIONAL CITY, CA
 91950-2953
Phone: (619) 427-3481
Fax: (619) 618-0222
After Hours Phone: (619)
 427-3481
Provider Gender: Male
License number: DPM5418
NPI: 1689069874
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PUCCINELLI, ALAYNA M

Provider ID: 125046
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 610 EUCLID AVE STE 301
 NATIONAL CITY, CA
 91950-2953

Phone: (619) 292-2493
Fax: (619) 618-0222
After Hours Phone: (619)
 292-2493
Provider Gender: Female
License number: DPM5349
NPI: 1487072278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Paradise
 Valley Hospital, Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SANICOLAS, MARIA THERESA P

Provider ID: 204840
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 610 EUCLID AVE STE 304
 NATIONAL CITY, CA
 91950-2953
Phone: (619) 470-6800
Fax: (866) 232-7229
After Hours Phone: (619)
 470-6800
Provider Gender: Female
License number: DPM4303
NPI: 1891893962
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

PULMONARY DISEASES

LIM, ROSEMARIE S
Provider ID: 262224
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 610 EUCLID AVE STE 202
 NATIONAL CITY, CA
 91950-2952
Phone: (619) 472-2665
Fax: (619) 479-9468
After Hours Phone: (619) 472-2665
Provider Gender: Female
License number: A51827
NPI: 1841303419
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

SAZON, DOTTIE A
Provider ID: 66295
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 655 EUCLID AVE STE 206
 NATIONAL CITY, CA
 91950-2967
Phone: (619) 267-3188
Fax: (619) 267-3388
After Hours Phone: (619) 267-3188
Provider Gender: Female
License number: A48932
NPI: 1033222708
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

REGISTERED PHYSICAL THERAPIST

DIEP, HUY M
Provider ID: 269130
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1626 SWEETWATER RD STE A
 NATIONAL CITY, CA
 91950-7645
Phone: (619) 474-5916
Fax: (619) 474-8662
After Hours Phone: (619) 474-5916
Provider Gender: Male
License number: PT294143
NPI: 1447765508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KARANDE, PRACHI
Provider ID: 287102
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3400 E 8TH ST STE 108
 NATIONAL CITY, CA
 91950-3168
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

License number: PT300083

NPI: 1699357525

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NOVENCIDO, ANDREW

Provider ID: 286784

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3400 E 8TH ST STE 108

NATIONAL CITY, CA

91950-3168

Phone: (619) 482-3000

Fax: (619) 695-0050

After Hours Phone: (619)

482-3000

Provider Gender: Male

License number: PT295915

NPI: 1447723937

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: 204159

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

502 EUCLID AVE STE 300

NATIONAL CITY, CA

91950-2950

Phone: (619) 623-3000

Fax:

After Hours Phone: (619)

623-3000

Provider Gender: Female

License number: A97619

NPI: 1871718189

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Russian, Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

SURGERY NEUROLOGICAL

YOO, FRANK K , MD

Provider ID: 257372

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2345 E 8TH ST STE 110

NATIONAL CITY, CA

91950-2861

Phone: (858) 909-9033

Fax:

After Hours Phone: (858)

909-9033

Provider Gender: Male

License number: G86513

NPI: 1295774545

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean, Spanish, Telugu,

Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas, Tri

City Medical Ctr, Palomar Health

Downtown Campus, Pomerado

Hospital, Alvarado Hospital Llc,

Paradise Valley Hospital,

Southwest Healthcare System

Wildomar, Southwest Healthcare

System Murrieta, Scripps Mercy

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT

FISHER, CASEY J

Provider ID: 269184

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3142 VISTA WAY STE 207
 OCEANSIDE, CA 92056-3628
Phone: (760) 610-0522
Fax: (760) 610-0523
After Hours Phone: (760) 610-0522
Provider Gender: Male
License number: A118592
NPI: 1275780686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Pomerado
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED NURSE PRACTITIONER

BROMAN, GRETCHEN L
Provider ID: 280192
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female

License number: NP95007885
NPI: 1922421288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAMBERLIN, KALIANA, NPA
Provider ID: 273018
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95013030
NPI: 1457995706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EKLUND, BONNIE L , NPA
Provider ID: 243625
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP15285
NPI: 1811978992
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GORDON, CAITLIN R
Provider ID: 246043
Board Certified Specialty: No
UCSD MEDICAL GROUP
 3998 VISTA WAY STE A
 OCEANSIDE, CA 92056-4514
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP23078
NPI: 1063842078
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEAD, KRISTIN N

Provider ID: 268660
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: NP20264
NPI: 1699078923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

KASTNER, NICOLE D

Provider ID: 262127
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY BLDG B
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Provider Gender: Female
License number: NP14131
NPI: 1023051869
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LIPMAN, RACHEL E

Provider ID: 265113
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY BLDG B
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Provider Gender: Female
License number: NP95000707

NPI: 1871933879
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MIRANDA, BRIDGET A

Provider ID: 262340
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax:
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: NP95006082
NPI: 1225548159
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Northern Inyo Hosp
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

PRITZKER, JOELY R

Provider ID: 121198
Board Certified Specialty: No
VISTA COMMUNITY CLNC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95000955
NPI: 1619384351

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRITZKER, JOELY R

Provider ID: 121198
Board Certified Specialty: No
IHP VISTA COMMUNITY CLINIC
RIVER
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95000955

NPI: 1619384351

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PRITZKER, JOELY R , NPA

Provider ID: 239772
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95000955
NPI: 1619384351

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 12/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RAMIREZ, ERIN K

Provider ID: 262344
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1010

Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Provider Gender: Female
License number: NP95000183
NPI: 1912310020

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANTIAGO, AMANDA C , NPA

Provider ID: 242607
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000

Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP95007724
NPI: 1619488731
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CERTIFIED REGISTERED NURSE MIDWIFE

ALSTON, VICKIE S

Provider ID: 257566

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

2210 MESA DR STE 5

OCEANSIDE, CA 92054-3701

Phone: (760) 757-5841

Fax: (760) 967-4863

After Hours Phone: (760)

757-5841

Provider Gender: Female

License number: NM993

NPI: 1932209905

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health
Plan Direct

DERMATOLOGY

AGUIRRE, KRISTEN R , MD

Provider ID: 243076

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9140

After Hours Phone: (760)

757-7546

Provider Gender: Female

License number: A135075

NPI: 1205255288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ANGRA, KUNAL, MD

Provider ID: 276058

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9138

After Hours Phone: (760)

757-7546

Provider Gender: Male

License number: A161745

NPI: 1871988147

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

GILBOA, RUTH, MD

Provider ID: 269414

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3629 VISTA WAY

OCEANSIDE, CA 92056-4522

Phone: (760) 757-7546

Fax: (760) 828-9140

After Hours Phone: (760)

757-7546

Provider Gender: Female

License number: A46557

NPI: 1205873197

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Hospital West

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

KIM, JESSICA Y

Provider ID: 247630
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Female
License number: 20A17031
NPI: 1245663228
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L

Provider ID: 108447
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L , MD

Provider ID: 269333
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A , MD

Provider ID: 269327

Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAMADY, JOSEPH A

Provider ID: 61777
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS INC A SURGICAL MED GRP
3629 VISTA WAY
OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A71411
NPI: 1013954908
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 8AM-12PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SCHAIRER, DAVID O

Provider ID: 264682
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Male
 License number: A148597
 NPI: 1619311164
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hospital Of Orange
 County
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SPRAGUE, JESSICA M

Provider ID: 242314
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Female
 License number: A134345
 NPI: 1437594884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

THIELE, JENS, MD

Provider ID: 269412
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
 Phone: (760) 757-7546
 Fax: (760) 828-9140
 After Hours Phone: (760) 757-7546
 Provider Gender: Male
 License number: A103862
 NPI: 1659562650
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

THIELE, JENS

Provider ID: 41713
 Board Certified Specialty: No
 DERMATOLOGY SPECIALISTS
 INC A SURGICAL MED GRP
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
 Phone: (760) 757-7546
 Fax:
 After Hours Phone: (760) 757-7546
 Provider Gender: Male
 License number: A103862
 NPI: 1659562650
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 8AM-12PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

VENKAT, ARUN P , MD

Provider ID: 269345
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P

Provider ID: 71978
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS INC A SURGICAL MED GRP
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WONG, DARRYL S , MD

Provider ID: 269368
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax: (760) 828-9140
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: G70557
NPI: 1952342693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Hospital West
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WONG, DARRYL S

Provider ID: 47164

Board Certified Specialty: No
DERMATOLOGY SPECIALISTS INC A SURGICAL MED GRP
 3629 VISTA WAY
 OCEANSIDE, CA 92056-4522
Phone: (760) 757-7546
Fax:
After Hours Phone: (760) 757-7546
Provider Gender: Male
License number: G70557
NPI: 1952342693
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Hospital West
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 8AM-12PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EMERGENCY MEDICINE

BELLOMO, THOMAS N

Provider ID: 205603
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: G69193
NPI: 1700926698

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOW, BYRON C

Provider ID: 206097
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: A78116
NPI: 1619907607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network
KEARNEY, LAUREN K
Provider ID: 206223
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: G83666
NPI: 1740296268

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LOVEJOY, AMY E

Provider ID: 206109
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: A75176
NPI: 1790856557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARIKH, PAYAL

Provider ID: 205869
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: 20A10898
NPI: 1871757989
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Kaiser Foundation Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PARKER, SHERINE B

Provider ID: 205787
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: G81658
NPI: 1477626513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Glendale
Adventist Med Ctr, Glendale
Memorial Hosp And Health Ctr,
Tri City Medical Ctr, Rady
Childrens Hospital San Diego,
Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network
RILEY-HAGAN, MARGARET
Provider ID: 205987
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020

Provider Gender: Female
License number: A49609
NPI: 1548352388
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ROSE, OLGA D

Provider ID: 205956
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A143536
NPI: 1740560044
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Sharp Memorial Hospital,
Scripps Memorial Hospital,
Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ENDOCRINOLOGY METABOLISM DIABETES

GOTTESMAN BOWEN, BETHANY L

Provider ID: 285960
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A156739
NPI: 1164849899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

FAMILY PRACTICE SPORTS MEDICINE

KAUFMAN, ELIZABETH A

Provider ID: 285904
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax:
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: A135037
NPI: 1942644679
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

GASTROENTEROLOGY

CHIAO, HELLEN, MD

Provider ID: 128127
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
 724-8782

Provider Gender: Female
License number: A127722
NPI: 1154681435
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cantonese, Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

DEVEREAUX, CHRISTOPHER E

Provider ID: 41551
Board Certified Specialty: No
 NORTH CNTY
 GASTROENTEROLOGY MED
 GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760)
 724-8782

Provider Gender: Male
License number: G75223
NPI: 1376512848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
 9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

DEVEREAUX, CHRISTOPHER E , MD

Provider ID: 41551
Board Certified Specialty: No
 NORTH CNTY
 GASTROENTEROLOGY MED
 GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
 213-8088

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G75223
NPI: 1376512848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KROL, THOMAS C
Provider ID: 41549
Board Certified Specialty: No
 NORTH CNTY
 GASTROENTEROLOGY MED
 GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760)
 724-8782
Provider Gender: Male
License number: G43649
NPI: 1568431146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
 9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KROL, THOMAS C , MD
Provider ID: 41549
Board Certified Specialty: Yes
 NORTH CNTY
 GASTROENTEROLOGY MED
 GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
 213-8088
Provider Gender: Male
License number: G43649
NPI: 1568431146
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Scripps Memorial
 Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHAD, JAVAID A
Provider ID: 41554
Board Certified Specialty: No
 NORTH CNTY
 GASTROENTEROLOGY MED

GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760)
 724-8782
Provider Gender: Male
License number: G86962
NPI: 1003885922
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital Encinitas, Tri
 City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA
 9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHAD, JAVAID A , MD
Provider ID: 41554
Board Certified Specialty: No
 NORTH CNTY
 GASTROENTEROLOGY MED
 GRP INC
 3923 WARING RD STE A
 OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760)
 724-8782
Provider Gender: Male
License number: G86962
NPI: 1003885922
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Hindi, Urdu
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIM, MICHAEL, MD

Provider ID: 41553
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760) 724-8782
Provider Gender: Male
License number: A88942
NPI: 1851503353
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc
SHIM, MICHAEL
Provider ID: 66003
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760) 724-8782
Provider Gender: Male
License number: A88942
NPI: 1851503353
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-TH 8AM-4:30PM, F,SA 9AM-5PM
Website: www.ncgastro.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VIERNES, MATTHEW E , MD
Provider ID: 41552
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760) 724-8782
Provider Gender: Male
License number: A61516
NPI: 1730158650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

Phone: (760) 724-8782
Fax: (760) 842-7801
After Hours Phone: (760) 213-8088
Provider Gender: Male
License number: A61516
NPI: 1730158650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VIERNES, MATTHEW E

Provider ID: 41552
Board Certified Specialty: No
NORTH CNTY
GASTROENTEROLOGY MED
GRP INC
3923 WARING RD STE A
OCEANSIDE, CA 92056-4499
Phone: (760) 724-8782
Fax:
After Hours Phone: (760) 724-8782
Provider Gender: Male
License number: A61516
NPI: 1730158650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-4:30PM, F,SA 9AM-5PM
 Website: www.ncgastro.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax:
 After Hours Phone: (760) 757-4566
 Provider Gender: Male
 License number: C152937
 NPI: 1831240159
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 8AM-5PM
 Website: www.ihpsocal.org
 Email:
 Medical Group(s): Truecare
 IPA:

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ N
 Provider ID: 282166
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A102482
 NPI: 1144486929
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr, Corona Regional Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

INTERNAL MEDICINE

CHONG, ILSONG J
 Provider ID: 122089
 Board Certified Specialty: No
 NORTH COUNTY HEALTH SERVICES VALLEY CENTER
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax:
 After Hours Phone: (760) 757-4566
 Provider Gender: Male
 License number: C152937
 NPI: 1831240159
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 8AM-5PM
 Website: www.ihpsocal.org
 Email:
 Medical Group(s): Truecare
 IPA:

CHONG, ILSONG J
 Provider ID: 122089
 Board Certified Specialty: No
 IHP N COUNTY HEALTH SERV LA MISSION

GOMEZ, DENISE Y
 Provider ID: 42413
 Board Certified Specialty: No
 NORTH COUNTY HEALTH SERVICES VALLEY CENTER
 605 CROUCH ST BLDG C
 OCEANSIDE, CA 92054-4415
 Phone: (760) 757-4566
 Fax: (760) 757-3004
 After Hours Phone: (760) 757-4566
 Provider Gender: Female
 License number: A66289
 NPI: 1407871817
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Palomar Medical

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D. Directorio de proveedores de atención especializada

Center

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 8AM-5PM

Website: www.ihpsocal.org

Email:

Medical Group(s): Truecare

IPA:

KYAW, NAING T

Provider ID: 287739

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3300 VISTA WAY STE B

OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760)

967-9900

Provider Gender: Male

License number: A97469

NPI: 1689784308

Provider English Spoken: Yes

Provider Language(s) Spoken:

Burmese, Chinese, Mandarin,

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/120

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205631

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Sharp Mary Birch

Hosp For Women And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

ADAMI, REBECCA R

Provider ID: 272673

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CASELE, HOLLY L

Provider ID: 205836

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

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D. Directorio de proveedores de atención especializada

Hospital, Tri City Medical Ctr,
Sharp Mary Birch Hosp For
Women And Newborns, Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CATANZARITE, VALERIAN A
Provider ID: 205743
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (858) 966-6711
After Hours Phone: (760)
547-1020
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Memorial Hospital, Tri City
Medical Ctr, Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Grossmont Hospital,
Scripps Memorial Hospital
Encinitas, Rady Childrens

Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MCCULLOUGH, DEIRDRE M
Provider ID: 210035
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Grossmont
Hospital, Sharp Memorial
Hospital, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

RICHARDSON, ALVIE C
Provider ID: 264686
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Rady
Childrens Hospital San Diego,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D
Provider ID: 205437
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital,
 Grossmont Hospital, Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Tri City Medical Ctr,
 Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TITH, TEVY

Provider ID: 205390
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Sharp Mary Birch
 Hosp For Women And
 Newborns, University Of
 California Irvine Med Ctr, Sharp
 Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WESTERMANN, MELISSA L

Provider ID: 255793
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary
 Birch Hosp For Women And
 Newborns, Earl And Lorraine
 Miller Childrens Hsp, Long Beach
 Memorial Med Ctr, University Of

California Irvine Med Ctr, Sharp
 Memorial Hospital, Grossmont
 Hospital, Sharp Grossmont
 Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WILLIAMS, KRISTIN M

Provider ID: 206230
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
 Health Care, Lucile Salter
 Packard Childrens Hosp, San
 Mateo Medical Ctr, Sharp
 Memorial Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Tri City Medical Ctr,
 California Pacific Med Ctr, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	BARAGER, RICHARD R , MD Provider ID: 65959 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 Phone: (760) 967-9900 Fax: (760) 967-6769 After Hours Phone: (760) 967-9900 Provider Gender: Male License number: G52074 NPI: 1508864448 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	License number: A161276 NPI: 1770938201 Provider English Spoken: Yes Provider Language(s) Spoken: Armenian, Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
NEPHROLOGY		
BARAGER, RICHARD R Provider ID: 262227 Board Certified Specialty: Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 Phone: (760) 967-9900 Fax: (760) 967-6769 After Hours Phone: (760) 967-9900 Provider Gender: Male License number: G52074 NPI: 1508864448 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	KHARADJIAN, TALAR B Provider ID: 279811 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 Phone: (760) 967-9900 Fax: (760) 967-6769 After Hours Phone: (760) 967-9900 Provider Gender: Female	KYAW, NAING T Provider ID: 287738 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 3300 VISTA WAY STE B OCEANSIDE, CA 92056-3633 Phone: (760) 967-9900 Fax: (760) 967-6769 After Hours Phone: (760) 967-9900 Provider Gender: Male License number: A97469 NPI: 1689784308 Provider English Spoken: Yes Provider Language(s) Spoken: Burmese, Chinese, Mandarin, Spanish Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/120 American Sign Language (ASL): No Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MATAYOSHI, AMY H

Provider ID: 262154

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

3300 VISTA WAY STE B
OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760)

967-9900

Provider Gender: Female

License number: A60790

NPI: 1417921982

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MATAYOSHI, AMY H , MD

Provider ID: 54126

Board Certified Specialty: No
BALBOA NEPHROLOGY MED

GRP INC

3300 VISTA WAY STE B

OCEANSIDE, CA 92056-3633

Phone: (760) 967-9900

Fax: (760) 967-6769

After Hours Phone: (760)

967-9900

Provider Gender: Female

License number: A60790

NPI: 1417921982

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NEUROLOGY CHILD

SAHAGIAN, MICHELLE L

Provider ID: 206075

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Female

License number: A80990

NPI: 1275604035

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NEUROLOGY

JINDAL, ANUJA V

Provider ID: 206266

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172

OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)

547-1020

Provider Gender: Female

License number: A149444

NPI: 1194046581

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Male <i>License number:</i> A124825 <i>NPI:</i> 1760776728 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic, French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
OBSTETRICS / GYNECOLOGY		
BINDER, PRATIBHA S <i>Provider ID:</i> 273226 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4002 VISTA WAY OCEANSIDE, CA 92056-4506 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A149945 <i>NPI:</i> 1174758031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	BANSAL, PREETI <i>Provider ID:</i> 205619 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (960) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (960) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A90890 <i>NPI:</i> 1871664631 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	BHATIA, SHAGUN K <i>Provider ID:</i> 267318 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 <i>Phone:</i> (760) 547-1020 <i>Fax:</i> (760) 547-1021 <i>After Hours Phone:</i> (760) 547-1020 <i>Provider Gender:</i> Female <i>License number:</i> A154902 <i>NPI:</i> 1104237353 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i>
OPHTHALMOLOGY		
ABBOUD, JEAN-PAUL J <i>Provider ID:</i> 214192 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Network	OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Male License number: A100897 NPI: 1497792220 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group
MOLL, ANGELA M Provider ID: 114919 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Female License number: A105472 NPI: 1861648602 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health	MOLL, ANGELA M Provider ID: 205509 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: (760) 547-1021 After Hours Phone: (760) 547-1020 Provider Gender: Female License number: A105472 NPI: 1861648602 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	OHALLORAN, HENRY S Provider ID: 114922 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3605 VISTA WAY STE 172 OCEANSIDE, CA 92056-4565 Phone: (760) 547-1020 Fax: After Hours Phone: (760) 547-1020 Provider Gender: Male License number: A73282 NPI: 1235287947 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital,
MOVAGHAR, MANSOOR Provider ID: 216416 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3605 VISTA WAY STE 172		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

OHALLORAN, HENRY S

Provider ID: 205887

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Male

License number: A73282

NPI: 1235287947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PANSARA, MEGHA L

Provider ID: 286601

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female

License number: A143429

NPI: 1184983728

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Pomerado Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ROBINSON, FANE L

Provider ID: 48365

Board Certified Specialty: No
SAN DIEGO RETINA ASSOCIATES A MED CORP

3231 WARING CT STE S
OCEANSIDE, CA 92056-4510

Phone: (760) 631-6144

Fax:

After Hours Phone: (760) 631-6144

Provider Gender: Male

License number: A45990

NPI: 1295894368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website: sdretina.com

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHER, COLIN A

Provider ID: 125406

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760) 547-1020

Provider Gender: Male

License number: A42700

NPI: 1396816153

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center,
 Grossmont Hospital, Tri City
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SCHER, COLIN A

Provider ID: 206328
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Palomar Medical Center,
 Grossmont Hospital, Tri City
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SMITH, MARK D

Provider ID: 27195
Board Certified Specialty: No
 SAN DIEGO RETINA
 ASSOCIATES A MED CORP
 3231 WARING CT STE S
 OCEANSIDE, CA 92056-4510
Phone: (760) 631-6144
Fax:
After Hours Phone: (760)
 631-6144
Provider Gender: Male
License number: G55641
NPI: 1255490330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Memorial
 Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website: sdretina.com
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R

Provider ID: 206086
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (858) 966-6711
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

OTOLARYNGOLOGY

BLISS, MORGAN R

Provider ID: 112861
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax:
After Hours Phone: (760)
 547-1020

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

FRIESEN, TZYYNONG L

Provider ID: 244899
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax:
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: A152327
NPI: 1952740177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

JACOBS, ROBERT D

Provider ID: 39335
Board Certified Specialty: No
 E N T ASSOCIATES MED GRP
 3907 WARING RD STE 1
 OCEANSIDE, CA 92056-4454
Phone: (760) 724-8749
Fax:
After Hours Phone: (760)
 724-8749
Provider Gender: Male
License number: G52767
NPI: 1023028446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Pomerado Hospital,
 Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8:30AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEUIN, SHELBY C

Provider ID: 206111
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: A112930
NPI: 1124230909
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

REISMAN, BRUCE K

Provider ID: 35206
Board Certified Specialty: No
 E N T ASSOCIATES MED GRP
 3907 WARING RD STE 1
 OCEANSIDE, CA 92056-4454
Phone: (760) 724-8749
Fax:
After Hours Phone: (760)
 724-8749
Provider Gender: Male
License number: G59056
NPI: 1699785014
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr, Palomar Medical
 Center, Pomerado Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8:30AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Network
GROSSFELD, PAUL D
 Provider ID: 51918
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020

Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Male
 License number: G69132
 NPI: 1477624138
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GROSSFELD, PAUL D
 Provider ID: 205614
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Male
 License number: A52799
 NPI: 1225109085
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Provider Gender: Male
 License number: A52799
 NPI: 1225109085
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, LAWRENCE F
 Provider ID: 205332
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565

PEDIATRIC EMERGENCY MEDICINE

JOSHI, WEENA E
 Provider ID: 262236
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760) 547-1020
 Provider Gender: Female
 License number: A91208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1376862177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Pomerado Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

KANTHARIA, TINA H

Provider ID: 206293
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760)
 547-1020
 Provider Gender: Female
 License number: A126911
 NPI: 1659632362
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
VAIDYA, KAMALA
 Provider ID:
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1000
 Fax: (760) 547-1021
 After Hours Phone: (760)
 547-1000
 Provider Gender: Female
 License number: A124814
 NPI: 1083840920

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC ENDOCRINOLOGY

MARINKOVIC, MAJA

Provider ID: 206138
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565

Phone: (858) 966-4032
 Fax: (858) 966-6227
 After Hours Phone: (858)
 966-4032
 Provider Gender: Female
 License number: A95251
 NPI: 1053469767
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC GASTROENTEROLOGY

CASTANO, DANIELA

Provider ID: 205831
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
 Phone: (760) 547-1020
 Fax: (760) 547-1021
 After Hours Phone: (760)
 547-1020
 Provider Gender: Female
 License number: A132006
 NPI: 1851616478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PEDIATRIC INFECTIOUS DISEASES

CHRISTMAN, JAMESINA C
Provider ID: 259979
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1000
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp Of Los Angeles, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/19
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC ORTHOPEDICS

UPASANI, VIDYADHAR V
Provider ID: 260954
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC RHEUMATOLOGY

**CHIRASEVEENUPRAPUND,
PETER**
Provider ID: 205937
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (858) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRICS

LANGLEY, GREGORY H
Provider ID: 205700
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Male
License number: G88047
NPI: 1427049675

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WANG, EMILY J

Provider ID: 126806

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: A89393

NPI: 1427142363

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps
Memorial Hospital Encinitas,
Rady Childrens Hospital San
Diego, Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

License number: A170177

NPI: 1447645742

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT

CLARK, YVONNE L

Provider ID: 260064

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA20447

NPI: 1629302476

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FLOCO, VIRGINIA A

Provider ID: 260684

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020

Fax:

After Hours Phone: (760)
547-1020

Provider Gender: Female

License number: PA20788

NPI: 1982798112

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LAZAR, ANITA A

Provider ID: 262303
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: PA55984
NPI: 1609208198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MCCAULEY, KRISTINA R

Provider ID: 262242
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

NGUYEN, CECILIA

Provider ID: 289156
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
 547-1020
Provider Gender: Female
License number: PA57419

NPI: 1629636816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PODIATRIST

SPRINGER, DEWAIN N

Provider ID: 26711
Board Certified Specialty: No
 NORTH COUNTY PODIATRY
 CLINIC
 2191 S EL CAMINO REAL STE
 101
 OCEANSIDE, CA 92054-6225
Phone: (760) 757-7171
Fax:
After Hours Phone: (760)
 757-7171
Provider Gender: Male
License number: DPM3097
NPI: 1881709459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W

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D. Directorio de proveedores de atención especializada

Hours: M,F,SA 9AM-5PM, TU-TH 8AM-3PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC X-RAY

ALLEN, DERRICK R , MD

Provider ID: 268360
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3601 VISTA WAY
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ANDERSON, GREGORY S

Provider ID: 125988
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC

3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax:
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAKER, LORI L

Provider ID: 125997
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Female
License number: G62517
NPI: 1063465219
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126014
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
3601 VISTA WAY STE 101
OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

CHOU, ERIC T

Provider ID: 126012
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126052
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G50925

NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZNIA, NILOFAR

Provider ID: 126176
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (866) 558-4320
Fax:
After Hours Phone: (866) 558-4320
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Redlands Community Hosp, Barstow Community Hospital, Kindred Hospital Riverside, Victor Valley Global Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 126197
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (760) 631-7506
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Alvarado Hospital Llc, Oak Valley Dist Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY

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D. Directorio de proveedores de atención especializada

DOEMENY, JOHN M

Provider ID: 269751
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269636
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269529
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101A
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269823
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3601 VISTA WAY STE 101
 OCEANSIDE, CA 92056-4559
Phone: (760) 631-7505
Fax: (866) 558-4329
After Hours Phone: (760) 631-7505
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

ANDREW, MEAGAN S

Provider ID: 269373
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3142 VISTA WAY STE 101
 OCEANSIDE, CA 92056-3627

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D. Directorio de proveedores de atención especializada

Phone: (951) 696-9353
 Fax: (760) 630-5367
 After Hours Phone: (951) 696-9353
 Provider Gender: Female
 License number: PT291748
 NPI: 1366997702
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LEE, MICHAEL E

Provider ID: 269372
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2335 VISTA WAY
 OCEANSIDE, CA 92054-5663
 Phone: (855) 344-5870
 Fax: (877) 298-4204
 After Hours Phone: (855) 344-5870
 Provider Gender: Male
 License number: PT43323
 NPI: 1841656170
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RHEAUME, ALEXANDER E
 Provider ID: 269461
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2335 VISTA WAY
 OCEANSIDE, CA 92054-5663
 Phone: (760) 547-2666
 Fax:
 After Hours Phone: (760) 547-2666
 Provider Gender: Male
 License number: PT39516
 NPI: 1053659854
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SURGERY CARDIOVASCULAR

GRAMINS, DANIEL L

Provider ID: 210048
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3998 VISTA WAY STE A
 OCEANSIDE, CA 92056-4514
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

Provider Gender: Male
 License number: G79711
 NPI: 1164495750
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Tri City
 Medical Ctr, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ONAITIS, MARK

Provider ID: 210298
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506
 Phone: (760) 726-2500
 Fax:
 After Hours Phone: (760) 726-2500
 Provider Gender: Male
 License number: C144886
 NPI: 1841310638
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Alvarado Hospital Llc, Paradise Valley Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SURGERY ORTHOPEDIC

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D

Provider ID: 244138
Board Certified Specialty: No
UCSD MEDICAL GROUP
4002 VISTA WAY
OCEANSIDE, CA 92056-4506
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TUNG, HOWARD

Provider ID: 244084
Board Certified Specialty: No
UCSD MEDICAL GROUP
4002 VISTA WAY
OCEANSIDE, CA 92056-4506

Provider Gender: Male
License number: G58235
NPI: 1538153341
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Tri City Medical Ctr, Palomar Medical Center, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

YOO, FRANK K , MD

Provider ID: 257373
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3998 VISTA WAY STE 108
OCEANSIDE, CA 92056-4515
Phone: (858) 909-9033
Fax: (858) 429-4009
After Hours Phone: (858) 909-9033
Provider Gender: Male
License number: G86513
NPI: 1295774545
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish, Telugu, Vietnamese
Cultural Competency: No

ANDERSON, JUSTIN

Provider ID: 289120
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: PA60229
NPI: 1366105074
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, Rady Childrens

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CIDAMBI, EMILY O

Provider ID: 246469
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (858) 966-6789
Fax: (858) 966-8519
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: A127390
NPI: 1659634699
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY J
Provider ID: 205498
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: A80244
NPI: 1407010556

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Scripps Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KLING, KAREN M

Provider ID: 206129
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565

Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
License number: A53583
NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, National Naval Med Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

UROLOGY

CHIANG, GEORGE

Provider ID: 205944
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3605 VISTA WAY STE 172
 OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
License number: A98687
NPI: 1093773954
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Parkview Community Hospital
Medical Center, Northern Inyo
Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARIETTI SHEPHERD, SARAH R

Provider ID: 265121
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056-4565
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760)
547-1020
Provider Gender: Female
License number: A106447
NPI: 1801094115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

POWAY

PODIATRIST

NEGRON, RICARDO J , MD

Provider ID: 274645
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858)
218-3000
Provider Gender: Male
License number: DPM5260
NPI: 1932548393
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence St
Joseph Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POWAY

ANESTHESIOLOGY PAIN

MANAGEMENT

COHEN, ZACHARY C , MD

Provider ID: 268179
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
631-3000
Provider Gender: Male
License number: A146733
NPI: 1598021982
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FISHER, CASEY J

Provider ID: 204416
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15725 POMERADO RD STE 218
POWAY, CA 92064-2060
Phone: (619) 825-8511
Fax:
After Hours Phone: (619)
825-8511
Provider Gender: Male
License number: A118592

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1275780686
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital, Pomerado
 Hospital, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VERDOLIN, MICHAEL H , MD
 Provider ID: 203330
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15725 POMERADO RD STE 218
 POWAY, CA 92064-2060
 Phone: (619) 825-8511
 Fax:
 After Hours Phone: (619)
 825-8511
 Provider Gender: Male
 License number: A92149
 NPI: 1477525657
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Coronado Hosp And
 Healthcare Ctr, Scripps Mercy
 Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

CARDIOLOGY

BALOUCH, MARYAM
 Provider ID: 269384
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15615 POMERADO RD
 POWAY, CA 92064-2405
 Phone: (760) 743-0546
 Fax:
 After Hours Phone: (760)
 743-0546
 Provider Gender: Female
 License number: A121988
 NPI: 1215201108
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BAYAT, HAMED, MD

Provider ID: 269450
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 592-2696
 Fax: (760) 743-8837
 After Hours Phone: (858)
 592-2696
 Provider Gender: Male
 License number: A61356
 NPI: 1356344196
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Pomerado Hospital, Palomar
 Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

CHEN, ANDREW K , MD
 Provider ID: 269315
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 592-2696
 Fax: (760) 743-8837
 After Hours Phone: (858)
 592-2696
 Provider Gender: Male
 License number: A120866

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D. Directorio de proveedores de atención especializada

NPI: 1134357007
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital, Palomar Health
 Downtown Campus, Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MULVIHILL, DANIEL F , MD
 Provider ID: 54301
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 580
 POWAY, CA 92064-2438
 Phone: (858) 592-2696
 Fax: (858) 592-0627
 After Hours Phone: (858)
 592-2696
 Provider Gender: Male
 License number: G55384
 NPI: 1124021969
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SERRY, ROD D , MD
 Provider ID: 269471
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3100
 Fax:

After Hours Phone: (858)
 675-3100
 Provider Gender: Male
 License number: A76061
 NPI: 1912945130
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

**VANICHSARN, CHRISTOPHER
 T , MD**
 Provider ID: 274775
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437

Phone: (858) 592-2696
 Fax: (858) 592-0627
 After Hours Phone: (858)
 592-2696
 Provider Gender: Male
 License number: A129210
 NPI: 1851658173
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CARDIOVASCULAR DISEASE

ZAKOV, KAMEN N , MD
 Provider ID: 122539
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 592-2696
 Fax: (760) 743-8837
 After Hours Phone: (858)
 592-2696
 Provider Gender: Male
 License number: G31706
 NPI: 1518933613
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED BEHAVIORAL ANALYST MASTERS

MASON, DIANA

Provider ID: 118103
Board Certified Specialty: No
 INCLUDE AUTISM INC
 15318 POMERADO RD
 POWAY, CA 92064-2436
Phone: (858) 603-5840
Fax: (619) 432-0048
After Hours Phone: (858) 603-5840
Provider Gender: Female
License number: BCBA23279
NPI: 1285172858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SALUCCI, CRISTIANA

Provider ID: 107369
Board Certified Specialty: No
 INCLUDE AUTISM INC
 15318 POMERADO RD

POWAY, CA 92064-2436
Phone: (858) 603-9835
Fax: (619) 432-0048
After Hours Phone: (858) 603-9835
Provider Gender: Female
License number: BCBA11621760
NPI: 1093199671
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

MCCONNIN, COMMERINA T

Provider ID: 280943
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Female
License number: NP7195
NPI: 1154653459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCELHOSE, JESSICA J

Provider ID: 281020
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Female
License number: NP95012326
NPI: 1013196310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MEYERS, JUDITH S , NPA

Provider ID: 257040
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax:
After Hours Phone: (858) 675-3100
Provider Gender: Female
License number: NP95010314
NPI: 1538637194
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NINCHAK, VIOLA M

Provider ID: 285897
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505
POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3017
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: NP95010549
NPI: 1275007403
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WOLFE, AMANDA S

Provider ID: 243582
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
15525 POMERADO RD STE B1
POWAY, CA 92064-2425
Phone: (858) 457-8333
Fax:
After Hours Phone: (858) 457-8333
Provider Gender: Female
License number: NP23837
NPI: 1063813475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WRIGHT, KIMBERLY D , NPA

Provider ID: 256378
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437

Phone: (858) 675-3200
Fax:
After Hours Phone: (858) 675-3200
Provider Gender: Female
License number: NP95006947
NPI: 1811400708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DERMATOLOGY

ARMSTRONG, PATRICK A , MD

Provider ID: 269732
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 400
POWAY, CA 92064-2437
Phone: (858) 675-3145
Fax: (858) 385-7855
After Hours Phone: (858) 675-3145
Provider Gender: Male
License number: A137103
NPI: 1588008775
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3145 Fax: (858) 385-7855 After Hours Phone: (858) 675-3145 Provider Gender: Male License number: A148966 NPI: 1356608319 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	No Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
CALAME, ANTOANELLA Provider ID: 109343 Board Certified Specialty: No COMPASS DERMATOPATHOLOGY INC 15725 POMERADO RD STE 102 POWAY, CA 92064-2057 Phone: (858) 397-5755 Fax: After Hours Phone: (858) 397-5755 Provider Gender: Female License number: A84455 NPI: 1285817569 Provider English Spoken: Yes Provider Language(s) Spoken: Romanian Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	SHEWMAKE, STEPHEN W , MD Provider ID: 88451 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3140 Fax: (858) 385-7855 After Hours Phone: (858) 675-3140 Provider Gender: Male License number: G36481 NPI: 1912973868 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL):	FAMILY PRACTICE
	FLINN, SCOTT D , MD Provider ID: 270054 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 Phone: (858) 675-3200 Fax: (858) 613-2938 After Hours Phone: (858) 675-3200 Provider Gender: Male License number: G68423 NPI: 1184694598 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Pomerado Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	
JOU, PAUL C , MD Provider ID: 269479 Board Certified Specialty: No	NAJAND, SADAF, MD Provider ID: 270055 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 675-3200
 Fax: (858) 613-2938
 After Hours Phone: (858) 675-3200
 Provider Gender: Female
 License number: A124150
 NPI: 1669769717
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

WELLS, TODD D , MD

Provider ID: 129348
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3200
 Fax: (858) 613-2938
 After Hours Phone: (858) 675-3200
 Provider Gender: Male
 License number: A71920
 NPI: 1952377806
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc
WHITE, KERI L , MD
 Provider ID: 269491
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3200
 Fax: (858) 613-2938
 After Hours Phone: (858) 675-3200
 Provider Gender: Female
 License number: A73336
 NPI: 1295701159
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GASTROENTEROLOGY

ZAKKO, MARAM F , MD

Provider ID: 270028
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437

Phone: (858) 675-3150
 Fax: (858) 613-2941
 After Hours Phone: (858) 675-3150
 Provider Gender: Male
 License number: A64346
 NPI: 1972579068
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian, Chinese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Health Downtown Campus,
 Pomerado Hospital, Palomar
 Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E, R,
 W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

INTERNAL MEDICINE GERIATRIC MEDICINE

SCHWARTZ, MARTIN A , MD

Provider ID: 122531
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3135
 Fax: (858) 726-6081
 After Hours Phone: (858) 675-3135
 Provider Gender: Male
 License number: G39185
 NPI: 1861606790
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

THAPER, MOHINDERPAL S , MD
Provider ID: 270016
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 575
 POWAY, CA 92064-2438
Phone: (858) 675-3135
Fax: (858) 726-6050
After Hours Phone: (858) 675-3135
Provider Gender: Male
License number: A106869
NPI: 1295795037
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax:
After Hours Phone: (858) 675-3100
Provider Gender: Male
License number: G69663
NPI: 1346358793
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INTERNAL MEDICINE

GREENSTEIN, JOSHUA K
Provider ID: 113528
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
Phone: (760) 294-1660
Fax:
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A68100
NPI: 1104881457
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 9AM-5PM, SA 9AM-5PM

TRESTMAN, KENNETH G , MD
Provider ID: 269146
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400

NEONATAL / PERINATAL MEDICINE

FATAYERJI, NABIL I
Provider ID: 205749
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Male
License number: A63224
NPI: 1649341405
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Arabic
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLEMBESKI, DAVID J

Provider ID: 205891
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Palomar Health Downtown Campus, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAUER, CHARLES W

Provider ID: 206164
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Pomerado Hospital, Scripps Memorial Hospital, Southwest Healthcare System

Murrieta, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NEPHROLOGY

BOISKIN, MARK M

Provider ID: 40763
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
Phone: (760) 294-1660
Fax:
After Hours Phone: (760) 294-1660
Provider Gender: Male
License number: A52055
NPI: 1437154143
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

BOISKIN, MARK M

Provider ID: 40763
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
 Phone: (858) 558-8150
 Fax: (858) 485-8703
 After Hours Phone: (858)
 558-8150
 Provider Gender: Male
 License number: A52055
 NPI: 1437154143
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Afrikaans, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas,
 Scripps Memorial Hospital, Sharp
 Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

GREENSTEIN, JOSHUA K

Provider ID: 262223
 Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760)
 294-1660
 Provider Gender: Male
 License number: A68100
 NPI: 1104881457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Palomar Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SHAPIRO, MARK H

Provider ID: 113537
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
 Phone: (760) 294-1660
 Fax:
 After Hours Phone: (760)
 294-1660
 Provider Gender: Male
 License number: G65280
 NPI: 1912962275

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Tri City Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SHAPIRO, MARK H

Provider ID: 262183
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 15708 POMERADO RD # N-205
 POWAY, CA 92064-2066
 Phone: (760) 294-1660
 Fax: (760) 745-5016
 After Hours Phone: (760)
 294-1660
 Provider Gender: Male
 License number: G65280
 NPI: 1912962275
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Tri City Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: 0/999
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Board Certified Specialty: No COMMUNITY CARE IPA LLC 15721 POMERADO RD POWAY, CA 92064-2021 Phone: (760) 631-3000 Fax: After Hours Phone: (760) 631-3000 Provider Gender: Male License number: C146015 NPI: 1710157920 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/200 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Medical Center, Pomerado Hospital, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 18/200 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
NEUROLOGY		
BLUMENFELD, ANDREW M , MD Provider ID: 268086 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: A47863 NPI: 1164459913 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: A105660 NPI: 1386890770 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL):	WANG, CHUNYANG T , MD Provider ID: 268120 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Female License number: A105660 NPI: 1386890770 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin, Spanish Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Pomerado Hospital, Scripps Memorial Hospital, Palomar Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL):
DELANEY, MICHAEL W , MD Provider ID: 269105	DELANEY, MICHAEL W , MD Provider ID: 272331 Board Certified Specialty: No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 505 POWAY, CA 92064-2437 Phone: (760) 631-3000 Fax: (760) 631-3016 After Hours Phone: (760) 631-3000 Provider Gender: Male License number: C146015 NPI: 1710157920 Provider English Spoken: Yes	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 485-7870 <i>Fax:</i> (858) 485-6473 <i>After Hours Phone:</i> (858) 485-7870 <i>Provider Gender:</i> Male <i>License number:</i> G80210 <i>NPI:</i> 1790882728 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
OPHTHALMOLOGY		
COBB, DAMON C <i>Provider ID:</i> 206030 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 15706 POMERADO RD STE 110 POWAY, CA 92064-2032 <i>Phone:</i> (858) 485-0130 <i>Fax:</i> (858) 485-9424 <i>After Hours Phone:</i> (858) 485-0130 <i>Provider Gender:</i> Male <i>License number:</i> 20A11368 <i>NPI:</i> 1851435598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Scripps Memorial Hospital, Grossmont Hospital, Palomar Health Downtown Campus, Sharp Memorial Hospital, Palomar Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>	LOZIER, JEFFREY R , MD <i>Provider ID:</i> 270187 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 <i>Phone:</i> (858) 675-3140 <i>Fax:</i> (858) 613-2936 <i>After Hours Phone:</i> (858) 675-3140 <i>Provider Gender:</i> Male <i>License number:</i> G54719 <i>NPI:</i> 1225004450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	LEARN, ALISON A , MD <i>Provider ID:</i> 70715 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 15525 POMERADO RD STE C1 POWAY, CA 92064-2425 <i>Phone:</i> (858) 485-7870 <i>Fax:</i> (858) 485-6473 <i>After Hours Phone:</i> (858) 485-7870 <i>Provider Gender:</i> Female <i>License number:</i> G78450 <i>NPI:</i> 1477650406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No
OBSTETRICS / GYNECOLOGY		
OTOLARYNGOLOGY		
	FITZGERALD, PATRICK J , MD <i>Provider ID:</i> 70742 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 15525 POMERADO RD STE C1 POWAY, CA 92064-2425	

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D. Directorio de proveedores de atención especializada

☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEDIATRICS

FATAYERJI, NABIL I

Provider ID: 52509
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax:
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: A63224
NPI: 1649341405
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Pomerado Hospital, Southwest
 Healthcare System Wildomar,
 Southwest Healthcare System
 Murrieta, Palomar Medical
 Center, Scripps Memorial
 Hospital, Scripps Mercy Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Memorial Hospital
 Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GOLEMBESKI, DAVID J

Provider ID: 52531
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax:
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: G63111
NPI: 1376614131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Encinitas, Pomerado Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta, Palomar
 Medical Center, Scripps
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SAUER, CHARLES W

Provider ID: 52545
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858)
 613-4143
Provider Gender: Male
License number: 20A9535
NPI: 1538388988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital
 Encinitas, Palomar Medical
 Center, Scripps Mercy Hospital
 Chula Vista, Pomerado Hospital,
 Scripps Memorial Hospital,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW C

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 257589
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
15644 POMERADO RD STE 204 POWAY, CA 92064-2419
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619) 379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

BULLOCK, ANDREW C

Provider ID: 268442
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15644 POMERADO RD STE 204 POWAY, CA 92064-2419
Phone: (619) 379-6579
Fax: (619) 501-3846
After Hours Phone: (619) 379-6579
Provider Gender: Male
License number: 20A6842
NPI: 1295743045

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Fataleka, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA J

Provider ID: 276715
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 525 POWAY, CA 92064-2439
Phone: (858) 485-0050
Fax: (858) 673-5187
After Hours Phone: (858) 485-0050
Provider Gender: Female
License number: PA57107
NPI: 1215584628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GRINDLE, SILVIA S

Provider ID: 269926
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
13525 MIDLAND RD STE F POWAY, CA 92064-4772
Phone: (858) 486-9100
Fax: (858) 486-9101
After Hours Phone: (858) 486-9100
Provider Gender: Female
License number: PA21499
NPI: 1598056392
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HUANG, STEPHANIE K , NPA

Provider ID: 268025
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
15611 POMERADO RD STE 505 POWAY, CA 92064-2437
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
License number: PA21008

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D. Directorio de proveedores de atención especializada

NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HUANG, STEPHANIE K , NPA

Provider ID: 269352
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15721 POMERADO RD
 POWAY, CA 92064-2021
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760)
 631-3000
Provider Gender: Female
License number: PA21008
NPI: 1073826210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PULMONARY DISEASES

BENDER, FRANK D , MD
Provider ID: 270195
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 580
 POWAY, CA 92064-2438
Phone:
Fax:
After Hours Phone:
Provider Gender: Male
License number: G33933
NPI: 1912015363
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Palomar
 Medical Center, Pomerado
 Hospital, Palomar Health
 Downtown Campus
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

OTOSHI, JAMES S , MD

Provider ID: 274767
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760)
 489-1458
Provider Gender: Male
License number: G27763

NPI: 1679681027
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
 Health Downtown Campus,
 Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

POPPER, STEVEN T , MD

Provider ID: 129606
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
Phone: (858) 675-3100
Fax: (858) 675-3100
After Hours Phone: (858)
 675-3100
Provider Gender: Male
License number: A127156
NPI: 1679849012
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Kaiser
 Foundation Hospital Bellflower,
 Palomar Medical Center, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Phone: (858) 487-9729 Fax: (866) 558-4329 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A69840 NPI: 1215982970 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
RADIOLOGY DIAGNOSTIC X-RAY		
ALLEN, DERRICK R Provider ID: 125995 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A69840 NPI: 1215982970 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	ANDERSON, GREGORY S Provider ID: 125986 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: After Hours Phone: (858) 487-9729 Provider Gender: Male License number: A90018 NPI: 1841467099 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista	BAKER, LORI L Provider ID: 125994 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Female License number: G62517 NPI: 1063465219 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Medical Ctr At Ucsf, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
ALLEN, DERRICK R , MD Provider ID: 268359 Board Certified Specialty: No COMMUNITY CARE IPA LLC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531	BORSO, MAYA G Provider ID: 126007	

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W

Provider ID: 243262
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (866) 558-4329
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 126015
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 126043
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A
 POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: A62473
NPI: 1497708622

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta, Coast Plaza Hospital, Community Hospital Of Huntington Park, Foothill Regional Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126049
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (619) 295-9729
After Hours Phone: (858)
487-9729
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FIROOZANIA, NILOFAR

Provider ID: 126174
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax:
After Hours Phone: (858)
487-9729
Provider Gender: Female
License number: A109806
NPI: 1962521419
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Redlands
Community Hosp, Barstow
Community Hospital, Kindred
Hospital Riverside, Victor Valley
Global Med Ctr, Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRANKE, MARK A

Provider ID: 126055
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax:
After Hours Phone: (858)
487-9729
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HARMAN, SCOTT A

Provider ID: 126068
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858)
487-9729
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126080
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858)
487-9729

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D. Directorio de proveedores de atención especializada

Provider Gender: Male License number: G59632 NPI: 1073565792 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: G51551 NPI: 1508817305 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
LIZERBRAM, ERIC K Provider ID: 126093 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: G74959 NPI: 1598718926 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W	LUBISICH, JOHN P Provider ID: 126099 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 Phone: (858) 487-9729 Fax: (858) 487-4764 After Hours Phone: (858) 487-9729 Provider Gender: Male License number: G77575 NPI: 1194863902 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	NALBANDIAN, ALLEN B Provider ID: 29391 Board Certified Specialty: No VALLEY RADIOLOGY CONSULTANTS MED GRP INC 15725 POMERADO RD STE 101 POWAY, CA 92064-2057 Phone: (858) 485-6500 Fax: After Hours Phone: (858) 485-6500 Provider Gender: Male License number: A54742 NPI: 1619938099 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green
MOFFIT, BRIAN J Provider ID: 126120 Board Certified Specialty: No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> OSHAUGHNESSY, LOUISE S <i>Provider ID:</i> 126132 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Female <i>License number:</i> G48800 <i>NPI:</i> 1285685925 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider Gender:</i> Male <i>License number:</i> G42390 <i>NPI:</i> 1942253018 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista, Adventist Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
OLOUGHLIN, BRIAN J <i>Provider ID:</i> 126126 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> A120064 <i>NPI:</i> 1972709087 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Santa Monica Ucla Med Ctr, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	SCHECHTER, MARK S <i>Provider ID:</i> 126138 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729	SCHWARTZBERG, ROSS E <i>Provider ID:</i> 126145 <i>Board Certified Specialty:</i> No IHS RADIOLOGY MEDICAL GROUP INC 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531 <i>Phone:</i> (858) 487-9729 <i>Fax:</i> (858) 487-4764 <i>After Hours Phone:</i> (858) 487-9729 <i>Provider Gender:</i> Male <i>License number:</i> G72997 <i>NPI:</i> 1215976766 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SNYDER, WILLIAM C

Provider ID: 126152
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (866) 558-4329
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 126158
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A

POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNG, RAYMOND Y

Provider ID: 29394
Board Certified Specialty: No
 VALLEY RADIOLOGY CONSULTANTS MED GRP INC
 15725 POMERADO RD STE 101 POWAY, CA 92064-2057
Phone: (858) 485-6500
Fax: (760) 520-8520
After Hours Phone: (858) 485-6500
Provider Gender: Male
License number: A63965
NPI: 1023079365
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Pomerado Hospital, Scripps Green Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-4:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TENA, ROWENA G

Provider ID: 126164
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 12620 MONTE VISTA RD STE A POWAY, CA 92064-2531
Phone: (858) 487-9729
Fax: (858) 487-4764
After Hours Phone: (858) 487-9729
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 126217
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (858) 487-4764

After Hours Phone: (858)
487-9729

Provider Gender: Male

License number: A45908

NPI: 1730132150

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TSUKADA, GLENN H

Provider ID: 126202

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (858) 487-4764

After Hours Phone: (858)

487-9729

Provider Gender: Male

License number: A60235

NPI: 1710938394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Grossmont
Hospital, Scripps Mercy Hospital,
Ucsd Medical Ctr, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital Encinitas,

Scripps Green Hospital, Alvarado

Hospital Llc, Pomerado Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ZINK BRODY, GORDON C

Provider ID: 126195

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (858) 487-4764

After Hours Phone: (858)

487-9729

Provider Gender: Male

License number: G68636

NPI: 1689610362

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Alvarado
Hospital Llc, Oak Valley Dist
Hosp

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RADIOLOGY

DOEMENY, JOHN M

Provider ID: 269749

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (866) 558-4329

After Hours Phone: (858)
487-9729

Provider Gender: Male

License number: G50925

NPI: 1841243912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269634
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
12620 MONTE VISTA RD STE A
POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (866) 558-4329

After Hours Phone: (858)
487-9729

Provider Gender: Male

License number: A118792

NPI: 1114246329

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Santa Monica

Ucla Med Ctr, Ronald Reagan

Ucla Med Ctr, Alvarado Hospital
Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269528

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

12620 MONTE VISTA RD STE A

POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (866) 558-4329

After Hours Phone: (858)

487-9729

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245627

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

12620 MONTE VISTA RD STE A

POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax:

After Hours Phone: (858)

487-9729

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269825

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

12620 MONTE VISTA RD STE A

POWAY, CA 92064-2531

Phone: (858) 487-9729

Fax: (866) 558-4329

After Hours Phone: (858)

487-9729

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista, Vibra Hospital Of

San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

BLACKBURN, GARY L

Provider ID: 269448

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

15525 POMERADO RD STE D4

POWAY, CA 92064-2426

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 674-1600
 Fax: (858) 618-1523
 After Hours Phone: (858) 674-1600
 Provider Gender: Male
 License number: PT28897
 NPI: 1487769352
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

CHAN, ORIANA

Provider ID: 129858
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15525 POMERADO RD STE D4
 POWAY, CA 92064-2426
 Phone: (858) 674-1600
 Fax:
 After Hours Phone: (858) 674-1600
 Provider Gender: Female
 License number: PT293406
 NPI: 1023533155
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RHEUMATOLOGY

RAO, SOUMYA G , MD

Provider ID: 46060
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3150
 Fax: (858) 924-1775
 After Hours Phone: (858) 675-3150
 Provider Gender: Female
 License number: A99911
 NPI: 1033388616
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Kannada, Russian,
 Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REDDY, SMITHA C , MD

Provider ID: 269402
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15725 POMERADO RD STE 117
 POWAY, CA 92064-2058

Phone: (858) 312-1717
 Fax: (858) 435-0207
 After Hours Phone: (858) 312-1717
 Provider Gender: Female
 License number: A85072
 NPI: 1750534715
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Kannada, Telugu
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Pomerado Hospital,
 Scripps Mercy Hospital Chula
 Vista, Scripps Green Hospital,
 Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD

Provider ID: 119552
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 400
 POWAY, CA 92064-2437
 Phone: (858) 675-3286
 Fax: (858) 385-1690
 After Hours Phone: (858) 675-3286
 Provider Gender: Male
 License number: C52136
 NPI: 1407803687
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Armenian, Italian, Spanish,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc	<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc	<i>Phone:</i> (858) 485-0050 <i>Fax:</i> (858) 485-5071 <i>After Hours Phone:</i> (858) 485-0050 <i>Provider Gender:</i> Male <i>License number:</i> A62550 <i>NPI:</i> 1164536538 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc
BALIKIAN, PHILIP <i>Provider ID:</i> 257485 <i>Board Certified Specialty:</i> Yes BLUE SHIELD PROMISE HEALTH PLAN DIRECT 15611 POMERADO RD STE 400 POWAY, CA 92064-2437 <i>Phone:</i> (858) 675-3286 <i>Fax:</i> (858) 385-1690 <i>After Hours Phone:</i> (858) 675-3286 <i>Provider Gender:</i> Male <i>License number:</i> C52136 <i>NPI:</i> 1407803687 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian, Italian, Spanish, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	BRIED, JAMES M , MD <i>Provider ID:</i> 269500 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 525 POWAY, CA 92064-2439 <i>Phone:</i> (858) 485-0050 <i>Fax:</i> (858) 485-5071 <i>After Hours Phone:</i> (858) 485-0050 <i>Provider Gender:</i> Male <i>License number:</i> G62595 <i>NPI:</i> 1891809257 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus, Pomerado Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	COHEN, BRAD S , MD <i>Provider ID:</i> 269449 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 15611 POMERADO RD STE 525 POWAY, CA 92064-2439 <i>Phone:</i> (858) 485-0050 <i>Fax:</i> (858) 485-5071 <i>After Hours Phone:</i> (858) 485-0050 <i>Provider Gender:</i> Male <i>License number:</i> A62550 <i>NPI:</i> 1164536538 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Health Downtown Campus,
COHEN, BRAD S <i>Provider ID:</i> 257489 <i>Board Certified Specialty:</i> No BLUE SHIELD PROMISE HEALTH PLAN DIRECT 15611 POMERADO RD STE 525 POWAY, CA 92064-2439		

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D. Directorio de proveedores de atención especializada

Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

OWSLEY, KEVIN C , MD

Provider ID: 269325
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 525
 POWAY, CA 92064-2439
Phone: (858) 485-0050
Fax: (858) 485-5071
After Hours Phone: (858) 485-0050
Provider Gender: Male
License number: A98739
NPI: 1992714406
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Pomerado Hospital, Marina Del Rey Hospital, Palomar Medical Center, Adventist Health White Memorial
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc
PALANCA, ARIEL A , MD
Provider ID: 269861
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 15611 POMERADO RD STE 525
 POWAY, CA 92064-2439
Phone: (858) 485-0050
Fax: (760) 743-4779
After Hours Phone: (858) 485-0050
Provider Gender: Female
License number: A114257
NPI: 1629203971
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Lucile Salter Packard Childrens Hosp, Stanford Health Care
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

UROLOGY

DICKS, BRIAN M , MD

Provider ID: 270141
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12630 MONTE VISTA RD STE 103
 POWAY, CA 92064-2526

Phone: (858) 451-1772
Fax: (858) 429-7927
After Hours Phone: (858) 451-1772
Provider Gender: Male
License number: A100413
NPI: 1144425687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NEUSTEIN, PAUL, MD

Provider ID: 42034
Board Certified Specialty: No
 GENESIS HEALTHCARE PARTNERS PC
 15644 POMERADO RD STE 206
 POWAY, CA 92064-2419
Phone: (858) 485-0554
Fax: (858) 429-7933
After Hours Phone: (858) 485-0554
Provider Gender: Male
License number: G42225
NPI: 1578529731
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Doctors Hsp
 Of Modesto, Pomerado Hospital,
 Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PE, MARK- RALLY L , MD
Provider ID: 269348
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 12630 MONTE VISTA RD STE
 103
 POWAY, CA 92064-2526
Phone: (858) 451-1772
Fax: (858) 429-7927
After Hours Phone: (858)
 451-1772
Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

RAMONA

REGISTERED PHYSICAL THERAPIST

PFEIFER, JANAYA M
Provider ID: 269584
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 850 MAIN ST STE 105
 RAMONA, CA 92065-1968
Phone: (760) 789-1424
Fax:
After Hours Phone: (760)
 789-1424
Provider Gender: Female
License number: PT292928
NPI: 1699172593
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

STUDLEY, DAKOTA L
Provider ID: 270595
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 850 MAIN ST STE 105
 RAMONA, CA 92065-1968

Phone: (760) 789-1424
Fax:
After Hours Phone: (760)
 789-1424
Provider Gender: Female
License number: PT294388
NPI: 1972003101
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAN DIEGO

ADOLESCENT MEDICINE

INWARDS-BRELAND, DAVID
Provider ID: 267032
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY FL 2
 SAN DIEGO, CA 92123-2758
Phone: (858) 966-8493
Fax:
After Hours Phone: (858)
 966-8493
Provider Gender: Male
License number: A68214
NPI: 1043256738
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

INWARDS-BRELAND, DAVID

Provider ID: 267033
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax:
After Hours Phone: (858) 966-8493
Provider Gender: Male
License number: A68214
NPI: 1043256738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUMAR, MAYA M

Provider ID: 259637

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY # 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A126520
NPI: 1184066367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KUMAR, MAYA M

Provider ID: 262274
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A126520
NPI: 1184066367
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITCHEN, KANANI E

Provider ID: 259139
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A163273
NPI: 1184981797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

TITCHEN, KANANI E

Provider ID: 259140
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8493
Fax: (858) 966-8818
After Hours Phone: (858) 966-8493
Provider Gender: Female
License number: A163273
NPI: 1184981797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY N

Provider ID: 246311
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST

SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A156242
NPI: 1346515442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JASKI, BRIAN E

Provider ID: 53743
Board Certified Specialty: No
**SAN DIEGO CARDIAC CTR
MED GRP INC**
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: G55011
NPI: 1194706242
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula

Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAISSI SHABARI, FARSHAD

Provider ID: 110747
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A99160
NPI: 1124295027
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

RAISSI SHABARI, FARSHAD

Provider ID: 120351
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-5743
Fax:
After Hours Phone: (619) 543-5743
Provider Gender: Male
License number: A99160
NPI: 1124295027
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, French
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, El Centro Regional Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALLERGY IMMUNOLOGY

ACEVES, SEEMA S

Provider ID: 205624
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232

Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A74305
NPI: 1366511628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ACEVES, SEEMA S

Provider ID: 51868
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A74305
NPI: 1366511628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ALKATIB, RHONDA E

Provider ID: 271038
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 2655 CAMINO DEL RIO N STE 120
 SAN DIEGO, CA 92108-1633
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619) 286-6687
Provider Gender: Female
License number: A163910
NPI: 1417363086
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hosp Med Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BRODERICK, LORI

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 206080
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A106397
NPI: 1417152232
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOI, SUN

Provider ID: 273213
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122-1013
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A150029

NPI: 1306252101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, SUN

Provider ID: 273214
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A150029
NPI: 1306252101
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

COLLINS, CATHLEEN A

Provider ID: 118896
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax:
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A122537
NPI: 1205128089

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Lucile Salter Packard Childrens Hosp, Stanford Health Care, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COLLINS, CATHLEEN A

Provider ID: 285133
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A122537
 NPI: 1205128089
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Lucile Salter Packard Childrens Hosp, Stanford Health Care, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

EBBELING, WILLIAM L

Provider ID: 268259
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY # 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5961
 Fax:
 After Hours Phone: (858) 966-5961
 Provider Gender: Male
 License number: C50225
 NPI: 1205808284
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: St Agnes Medical Center, Fresno

Community Hospital, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HOFFMAN, HAROLD M

Provider ID: 51892
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-4003
 Fax:
 After Hours Phone: (858) 966-4003
 Provider Gender: Male
 License number: A53101
 NPI: 1326074261
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network

JAMES, CHRISTINE K

Provider ID: 284917
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 SAN DIEGO, CA 92122-1013
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A172774
 NPI: 1144589979
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LAUBACH, SUSAN S

Provider ID: 53683
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 5776 RUFFIN RD
 SAN DIEGO, CA 92123-1013
 Phone: (858) 292-4900
 Fax:
 After Hours Phone: (858) 292-4900
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A114061
 NPI: 1366656209
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

REDDY, SUMANA
 Provider ID: 262116
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 6699 ALVARADO RD STE 2301
 SAN DIEGO, CA 92120-5241
 Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619) 588-4074
 Provider Gender: Female
 License number: C52581
 NPI: 1053300251
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, SUMANA, MD
 Provider ID: 65617
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6699 ALVARADO RD STE 2301
 SAN DIEGO, CA 92120-5241
 Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619) 588-4074
 Provider Gender: Female
 License number: C52581
 NPI: 1053300251
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RIEDL, MARC A
 Provider ID: 255768
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 230
 SAN DIEGO, CA 92122-1010
 Phone: (858) 657-5350
 Fax:
 After Hours Phone: (858) 657-5350
 Provider Gender: Male
 License number: A75551
 NPI: 1285654889
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RIEDL, MARC A
 Provider ID: 84585
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 350
 SAN DIEGO, CA 92122-1010
 Phone: (858) 657-5350
 Fax:
 After Hours Phone: (858) 657-5350
 Provider Gender: Male
 License number: A75551

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D. Directorio de proveedores de atención especializada

NPI: 1285654889
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WALTERS, KRISTEN M

Provider ID: 109072
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 5776 RUFFIN RD
 SAN DIEGO, CA 92123-1013
 Phone: (858) 292-1144
 Fax:
 After Hours Phone: (858)
 292-1144
 Provider Gender: Female
 License number: A129955
 NPI: 1437442308
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
WELCH, MICHAEL J
 Provider ID: 206201
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK
 5776 RUFFIN RD
 SAN DIEGO, CA 92123-1013
 Phone: (858) 966-4900
 Fax: (858) 268-5145
 After Hours Phone: (858)
 966-4900
 Provider Gender: Male
 License number: G34844
 NPI: 1699794222

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/99
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

ANESTHESIOLOGY PAIN MANAGEMENT

ABDULHADI, HUSSEIN M

Provider ID: 262146
 Board Certified Specialty: Yes
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

6645 ALVARADO RD # 253
 SAN DIEGO, CA 92120-5208
 Phone: (619) 326-0326
 Fax: (619) 326-0101
 After Hours Phone: (619)
 326-0326
 Provider Gender: Male
 License number: A61032
 NPI: 1629004890
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc, Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

CASTELLANOS, JOEL

Provider ID: 243553
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A154199
 NPI: 1700296514
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

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D. Directorio de proveedores de atención especializada

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STEINER, ALICJA

Provider ID: 262105
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 2100 5TH AVE # 200
 SAN DIEGO, CA 92101-2102
Phone: (619) 948-8464
Fax: (619) 501-4806
After Hours Phone: (619)
 948-8464
Provider Gender: Female
License number: A69227
NPI: 1851309314
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Polish, Russian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

ANESTHESIOLOGY

OSWALD, JESSICA C

Provider ID: 239600
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A130925
NPI: 1427315118
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRIVEDI, SURAJ S

Provider ID: 246749
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A122196
NPI: 1699057885
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TZENG, ERIC

Provider ID: 284577
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A153819
NPI: 1801258264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

CARDIAC ELECTROPHYSIOLOGY	<i>License number:</i> A112325 <i>NPI:</i> 1427255967 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
HAN, FREDERICK T <i>Provider ID:</i> 210012 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A112325 <i>NPI:</i> 1427255967 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	CARDIOLOGY ALANI, ANAS A <i>Provider ID:</i> 201252 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A125237 <i>NPI:</i> 1154633709 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Loma Linda University Med Ctr, Riverside County Regional Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999	ALSHAWABKEH, LAITH <i>Provider ID:</i> 118271 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Male <i>License number:</i> A150246 <i>NPI:</i> 1346470408 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Arabic <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> BASSI, HARJOT K <i>Provider ID:</i> 109154 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED
HAN, FREDERICK T <i>Provider ID:</i> 210099 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male		

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D. Directorio de proveedores de atención especializada

FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700

Fax:
After Hours Phone: (858)
576-1700
Provider Gender: Female
License number: A137189
NPI: 1891025565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BOCK, MATTHEW J

Provider ID: 280463
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A112611
NPI: 1356514624
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Loma Linda

University Med Ctr, Loma Linda
University Childrens Hospital,
Rady Childrens Hospital San
Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

BORQUEZ, ALEJANDRO A

Provider ID: 284120
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: A138091
NPI: 1114277787
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

CASTELLANOS, LUIS R

Provider ID: 211764
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST FL 3
SAN DIEGO, CA 92103-2108
Phone: (858) 657-8530
Fax: (619) 543-2287
After Hours Phone: (858)
657-8530
Provider Gender: Male
License number: A89654
NPI: 1013059286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Pioneers Memorial
Hospital, El Centro Regional
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASTELLANOS, LUIS R

Provider ID: 211765
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A89654
NPI: 1013059286
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Pioneers Memorial
 Hospital, El Centro Regional
 Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHAU, PETER

Provider ID: 271427
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Male
License number: A124924
NPI: 1407146947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Loma Linda
 University Childrens Hospital,
 Loma Linda University Med Ctr,
 Rady Childrens Hospital San
 Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

COTTER, BRUNO R

Provider ID: 64554
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:

After Hours Phone: (619)
 543-6248
Provider Gender: Male
License number: A67069
NPI: 1205886389
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, German
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DUMMER, KIRSTEN B

Provider ID: 127310
Board Certified Specialty: No
 RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY # 5008
 MC
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: C156520
NPI: 1780642280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DUMMER, KIRSTEN B

Provider ID: 260595
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: C156520
NPI: 1780642280
Provider English Spoken: Yes
Provider Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DUONG, THAO T
Provider ID: 238975
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A142202
NPI: 1205272945
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOLDING, IAN F
Provider ID: 210823
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Male
License number: C157929
NPI: 1962974956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GOLLAPUDI, RAGHA R , MD
Provider ID: 270060
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7901 FROST ST
 SAN DIEGO, CA 92123-2701
Phone: (858) 499-1900
Fax:
After Hours Phone: (858)
 499-1900
Provider Gender: Male
License number: A73392
NPI: 1467429191

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Grossmont Hospital, Sharp
 Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GOLLAPUDI, RAGHA R , MD
Provider ID: 270061
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6402 EL CAJON BLVD # 102
 SAN DIEGO, CA 92115-2645
Phone: (858) 499-1900
Fax:
After Hours Phone: (858)
 499-1900
Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Scripps
 Mercy Hospital Chula Vista,
 Grossmont Hospital, Sharp
 Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc GREENBERG, BARRY H <i>Provider ID:</i> 64568 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Male <i>License number:</i> G29316 <i>NPI:</i> 1093773137 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> HALEY, JESSICA E <i>Provider ID:</i> 118754 <i>Board Certified Specialty:</i> No RADY CHILDRENS	SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A125568 <i>NPI:</i> 1023329885 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network HO, GORDON <i>Provider ID:</i> 127036 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (858) 657-8530 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8530 <i>Provider Gender:</i> Male <i>License number:</i> A117703 <i>NPI:</i> 1346516069 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese <i>Cultural Competency:</i> No	<i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> JUSTINO, HENRI <i>Provider ID:</i> 284123 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> C173773 <i>NPI:</i> 1518036821 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
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D. Directorio de proveedores de atención especializada

KIM, PAUL J

Provider ID: 121303
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: A109213
NPI: 1417104837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIM, PAUL J

Provider ID: 244996
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A109213
NPI: 1417104837
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KING, KEVIN R

Provider ID: 122219
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: A151729
NPI: 1437440427
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEHNERT SCHUCHARDT, ELEANOR L

Provider ID: 127691
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: A156946
NPI: 1760707210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LEHNERT SCHUCHARDT, ELEANOR L

Provider ID: 262250
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Female
 License number: A156946
 NPI: 1760707210
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/99
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MCCANDLESS, RACHEL T

Provider ID: 86645
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY BLDG
 24 FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5980
 Fax:
 After Hours Phone: (858)
 966-5980
 Provider Gender: Female
 License number: A131801
 NPI: 1487821815
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MIZZELL, ANNA M

Provider ID: 214020
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax:

After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A112810
 NPI: 1851561021
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MOHAMEDALI, BURHAN, MD

Provider ID: 245577

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629
 Phone: (619) 616-2100
 Fax: (619) 616-2104
 After Hours Phone: (619)
 616-2100
 Provider Gender: Male
 License number: A125669
 NPI: 1831393289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish, Swahili
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula
 Vista Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOORE, JOHN W

Provider ID: 205343
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 571-7903
 After Hours Phone: (858)
 966-5855
 Provider Gender: Male
 License number: G71756
 NPI: 1831203124
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego, Grossmont Hospital, Childrens Hosp And Resrch Ctr At Oakland, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MOUSSAVIAN, MEHRAN, MD

Provider ID: 242264
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MUELLER, DANA M

Provider ID: 245535
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A131157
NPI: 1184915712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NARAYANAN, MEENA R , MD

Provider ID: 247695
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629

Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
License number: A113448
NPI: 1508170697
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NGUYEN, TRI T

Provider ID: 121932
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7345 LINDA VISTA RD STE A
 SAN DIEGO, CA 92111-5800
Phone: (858) 277-5463
Fax: (858) 279-8296
After Hours Phone: (858) 277-5463
Provider Gender: Male
License number: G79496
NPI: 1962598425
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A126789 <i>NPI:</i> 1023373040 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
NGUYEN, TRI T <i>Provider ID:</i> 205379 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 4206 44TH ST SAN DIEGO, CA 92115-4820 <i>Phone:</i> (619) 624-9433 <i>Fax:</i> (619) 624-9436 <i>After Hours Phone:</i> (619) 624-9433 <i>Provider Gender:</i> Male <i>License number:</i> G79496 <i>NPI:</i> 1962598425 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/100 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>	NGUYEN, TRI T <i>Provider ID:</i> 270970 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 4206 44TH ST SAN DIEGO, CA 92115-4820 <i>Phone:</i> (619) 624-9433 <i>Fax:</i> (619) 624-9436 <i>After Hours Phone:</i> (619) 624-9433 <i>Provider Gender:</i> Male <i>License number:</i> G79496 <i>NPI:</i> 1962598425 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Chinese, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	SAH, SERENA P <i>Provider ID:</i> 101287 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A113704 <i>NPI:</i> 1295042653 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady
PHREANER, NICHOLAS J <i>Provider ID:</i> 239946 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP	PHREANER, NICHOLAS J <i>Provider ID:</i> 239946 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP	

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SHARF, ALBERT J , MD

Provider ID: 246500

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4444 EL CAJON BLVD STE 2
SAN DIEGO, CA 92115-4392

Phone: (619) 470-7700

Fax: (619) 900-4589

After Hours Phone: (619)
470-7700

Provider Gender: Male

License number: G72122

NPI: 1649349820

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Paradise Valley
Hospital, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHEN, JIA

Provider ID: 118285

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A149351

NPI: 1295053403

Provider English Spoken: Yes

Provider Language(s) Spoken:
Mandarin

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SILVA SEPULVEDA, JOSE A

Provider ID: 119314

Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Male

License number: A120119

NPI: 1417222472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

STEINBERG, LEONARD G

Provider ID: 248208

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)
966-5855

Provider Gender: Male

License number: C149271

NPI: 1538279484

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

STRINGER, JESSE D

Provider ID: 118220
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855

Fax:
After Hours Phone: (858) 966-5855

Provider Gender: Male
License number: A120899
NPI: 1972745388

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

THOMAS, ISAC C

Provider ID: 122433
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: A130326
NPI: 1003129388

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

VAUGHN, GABRIELLE R

Provider ID: 102157
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855

Fax:
After Hours Phone: (858) 966-5855

Provider Gender: Female
License number: A109772
NPI: 1891004461

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VELLORE GOVARDHAN, SHILPA

Provider ID: 271454
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855

Fax: (858) 966-7903
After Hours Phone: (858) 966-5855

Provider Gender: Female
License number: A121935
NPI: 1477702165

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

WALTERS, DANIEL

Provider ID: 240404
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A129565
 NPI: 1659665461
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WERHO, DAVID K

Provider ID: 118921
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax:
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A135895

NPI: 1235391863
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WILLIAMS, MATTHEW R

Provider ID: 101011
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A109398
 NPI: 1831423250
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

YEANG, CALVIN

Provider ID: 238822
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (858) 657-8530
 Fax:
 After Hours Phone: (858) 657-8530
 Provider Gender: Male
 License number: A127678
 NPI: 1598011058
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CARDIOVASCULAR DISEASE

ADLER, ERIC D

Provider ID: 120563
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-2030
Phone: (619) 543-5743
Fax:
After Hours Phone: (619) 543-5743
Provider Gender: Male
License number: A116525
NPI: 1477699601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ATHILL, CHARLES A

Provider ID: 53654
Board Certified Specialty: No
 SAN DIEGO CARDIAC CTR
 MED GRP INC
 3131 BERGER AVE STE 200
 SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: G78671
NPI: 1174504252
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps

Mercy Hospital Chula Vista,
 Sharp Chula Vista Med Ctr, Tri
 City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAHADORANI, JOHN N

Provider ID: 101234
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Male
License number: A123767
NPI: 1780883082
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BARNARD, DENISE D

Provider ID: 64528
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-5743
Fax: (619) 543-2917
After Hours Phone: (619) 543-5743
Provider Gender: Female
License number: G65241
NPI: 1669497731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CASTELLANOS, LUIS R

Provider ID: 64282
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: A89654
NPI: 1013059286
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Pioneers Memorial
 Hospital, El Centro Regional
 Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DEMARIA, ANTHONY N

Provider ID: 64558
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
 543-6248
Provider Gender: Male
License number: G20471
NPI: 1124043948
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FELD, GREGORY K

Provider ID: 64560
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (619) 543-7418
After Hours Phone: (619)
 543-6248
Provider Gender: Male
License number: G37258
NPI: 1720003924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GORDON, JOHN B

Provider ID: 53855
Board Certified Specialty: No
 SAN DIEGO CARDIAC CTR
 MED GRP INC
 3131 BERGER AVE STE 200
 SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858)
 244-6800
Provider Gender: Male
License number: C42631

NPI: 1962483099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOAGLAND, PETER M

Provider ID: 53768
Board Certified Specialty: No
 SAN DIEGO CARDIAC CTR
 MED GRP INC
 3131 BERGER AVE STE 200
 SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858)
 244-6800
Provider Gender: Male
License number: G54598
NPI: 1629059779
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
 Vista Med Ctr, Sharp Memorial
 Hospital, Sharp Mary Birch Hosp
 For Women And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W

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D. Directorio de proveedores de atención especializada

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PATEL, MITUL P

Provider ID: 64131

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A95406

NPI: 1457572448

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHEREV, DIMITRI A

Provider ID: 107321

Board Certified Specialty: No

BALBOA NEPHROLOGY MED

GRP INC

6402 EL CAJON BLVD # 100

SAN DIEGO, CA 92115-2645

Phone: (619) 582-4490

Fax: (619) 668-1554

After Hours Phone: (619)

582-4490

Provider Gender: Male

License number: A70917

NPI: 1154323996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Bulgarian, Malayalam, Russian, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,

Alvarado Community Hospital,

Sharp Memorial Hospital, Scripps

Memorial Hospital, Alvarado

Hospital Llc, Sharp Chula Vista

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 7:30AM-4PM, SA

9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CERTIFIED BEHAVIORAL ANALYST DOCTORATE

HOWARTH, MATTHEW

Provider ID: 103967

Board Certified Specialty: No

VERBAL BEHAVIOR

ASSOCIATES

15373 INNOVATION DR STE

200

SAN DIEGO, CA 92128-3425

Phone: (858) 699-7579

Fax:

After Hours Phone: (858)

699-7579

Provider Gender: Male

License number: BCBA4385

NPI: 1629338082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CERTIFIED BEHAVIORAL ANALYST MASTERS

ANDERSON, RENEE

Provider ID: 116603

Board Certified Specialty: No

ABACUS BEHAVIORAL

HEALTH

4204A ADAMS AVE

SAN DIEGO, CA 92116-2300

Phone: (619) 786-0074

Fax: (619) 202-7741

After Hours Phone: (619)

786-0074

Provider Gender: Female

License number: BCBA17411

NPI: 1952774028

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.abacusd.com
 Email:
 Medical Group(s):
 IPA:

CALARCO, KATHERINE

Provider ID: 116600
 Board Certified Specialty: No
 ABACUS BEHAVIORAL HEALTH
 4204A ADAMS AVE
 SAN DIEGO, CA 92116-2300
 Phone: (619) 786-0074
 Fax: (619) 202-7741
 After Hours Phone: (619) 786-0074
 Provider Gender: Female
 License number: BCBA2509
 NPI: 1528216876
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: www.abacusd.com
 Email:
 Medical Group(s):
 IPA:

ESSEY, MEREDITH

Provider ID: 105856
 Board Certified Specialty: No
 VERBAL BEHAVIOR

ASSOCIATES
 15373 INNOVATION DR STE 200
 SAN DIEGO, CA 92128-3425
 Phone: (858) 699-7579
 Fax:
 After Hours Phone: (858) 699-7579
 Provider Gender: Female
 License number: BCBA11417862
 NPI: 1508256736

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GRUNDON, GRETCHEN

Provider ID: 105857
 Board Certified Specialty: No
 VERBAL BEHAVIOR ASSOCIATES
 15373 INNOVATION DR STE 200
 SAN DIEGO, CA 92128-3425
 Phone: (858) 699-7579
 Fax:
 After Hours Phone: (858) 699-7579
 Provider Gender: Female
 License number: BCBA11212007
 NPI: 1346581063

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

JOHANNSEN, KAITLIN

Provider ID: 103981
 Board Certified Specialty: No
 VERBAL BEHAVIOR ASSOCIATES
 15373 INNOVATION DR STE 200
 SAN DIEGO, CA 92128-3425
 Phone: (858) 699-7579
 Fax:
 After Hours Phone: (858) 699-7579
 Provider Gender: Female
 License number: BCBA9560
 NPI: 1619370681
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LO, CRYSTAL

Provider ID: 105860
 Board Certified Specialty: No
 VERBAL BEHAVIOR

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D. Directorio de proveedores de atención especializada

ASSOCIATES
15373 INNOVATION DR STE 200
SAN DIEGO, CA 92128-3425
Phone: (858) 699-7579
Fax:
After Hours Phone: (858) 699-7579
Provider Gender: Female
License number: BCBA19702
NPI: 1184020760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LUND, CHRISTINA
Provider ID: 107337
Board Certified Specialty: No
AUTISM SPECTRUM THERAPIES
9445 FARNHAM ST STE 104
SAN DIEGO, CA 92123-1399
Phone: (866) 727-8274
Fax:
After Hours Phone: (866) 727-8274
Provider Gender: Female
License number: BCBA25064
NPI: 1508176314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MACHADO, AMY
Provider ID: 105863
Board Certified Specialty: No
INCLUDE AUTISM INC
625 PENNSYLVANIA AVE
SAN DIEGO, CA 92103-4321
Phone: (858) 603-9835
Fax:
After Hours Phone: (858) 603-9835
Provider Gender: Female
License number: BCBA11210466
NPI: 1205192093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MASON, DIANA
Provider ID: 118102
Board Certified Specialty: No
INCLUDE AUTISM INC
625 PENNSYLVANIA AVE
SAN DIEGO, CA 92103-4321

Phone: (858) 603-9835
Fax:
After Hours Phone: (858) 603-9835
Provider Gender: Female
License number: BCBA23279
NPI: 1285172858
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MONCLUS, BRITTANY
Provider ID: 116927
Board Certified Specialty: No
CENTER FOR AUTISM AND RELATED DISORDER
7297 RONSON RD STE H
SAN DIEGO, CA 92111-1428
Phone: (858) 278-6603
Fax: (866) 287-2383
After Hours Phone: (858) 278-6603
Provider Gender: Female
License number: BCBA22800
NPI: 1356894109
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> PEARCE, TAYLOR <i>Provider ID:</i> 106341 <i>Board Certified Specialty:</i> No OPTIMUM BEHAVIORAL HEALTH 3702 RUFFIN RD STE 100 SAN DIEGO, CA 92123-1893 <i>Phone:</i> (619) 297-4300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 297-4300 <i>Provider Gender:</i> Female <i>License number:</i> BCBA12133 <i>NPI:</i> 1396084935 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 9AM-6PM, SA 9AM-5PM <i>Website:</i> optimum behavioral health.com <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> POPE, CATHERINE <i>Provider ID:</i> 103983 <i>Board Certified Specialty:</i> No VERBAL BEHAVIOR ASSOCIATES 15373 INNOVATION DR STE 200	SAN DIEGO, CA 92128-3425 <i>Phone:</i> (858) 699-7579 <i>Fax:</i> <i>After Hours Phone:</i> (858) 699-7579 <i>Provider Gender:</i> Female <i>License number:</i> BCBA13424 <i>NPI:</i> 1265840763 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> SALUCCI, CRISTIANA <i>Provider ID:</i> 107365 <i>Board Certified Specialty:</i> No INCLUDE AUTISM INC 625 PENNSYLVANIA AVE SAN DIEGO, CA 92103-4321 <i>Phone:</i> (858) 603-9835 <i>Fax:</i> <i>After Hours Phone:</i> (858) 603-9835 <i>Provider Gender:</i> Female <i>License number:</i> BCBA11621760 <i>NPI:</i> 1093199671 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i>	<i>Hours:</i> M-F 8:30AM-5:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> SWAIN, JAZMINA <i>Provider ID:</i> 104803 <i>Board Certified Specialty:</i> No AUTISM SPECTRUM THERAPIES 9445 FARNHAM ST STE 104 SAN DIEGO, CA 92123-1399 <i>Phone:</i> (866) 727-8274 <i>Fax:</i> <i>After Hours Phone:</i> (866) 727-8274 <i>Provider Gender:</i> Female <i>License number:</i> BCBA17031 <i>NPI:</i> 1144618117 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> URIBE, ANNETTE <i>Provider ID:</i> 105872 <i>Board Certified Specialty:</i> No AUTISM SPECTRUM THERAPIES 9445 FARNHAM ST STE 104 SAN DIEGO, CA 92123-1399
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (866) 727-8274
 Fax:
 After Hours Phone: (866) 727-8274
 Provider Gender: Female
 License number: BCBA11521119
 NPI: 1528426012
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VOLEN, SHAWNA

Provider ID: 106468
 Board Certified Specialty: No
 AUTISM SPECTRUM THERAPIES
 9445 FARNHAM ST STE 104
 SAN DIEGO, CA 92123-1399
 Phone: (866) 727-8274
 Fax:
 After Hours Phone: (866) 727-8274
 Provider Gender: Female
 License number: BCBA18995
 NPI: 1710360417
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CERTIFIED NURSE PRACTITIONER

ABARE, KATHRYN H

Provider ID: 262187
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Female
 License number: NP95003999
 NPI: 1609147651
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/99
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

Provider ID: 106468
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP19601
 NPI: 1487801817
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr

ABCEDE, EMILY A

Provider ID: 263772
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Female
 License number: NP95007801
 NPI: 1548654916
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

ABDOU, KRISTY R

Provider ID: 104606
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP19601
 NPI: 1487801817
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

AGUILAR, JIRA JANE B

Provider ID: 284158
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: NP95016636
 NPI: 1376136770
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

AJMERA, ARCHANA J

Provider ID: 126606
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP22933
 NPI: 1063792240
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

AKINS, TARA M

Provider ID: 112490
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP14090
 NPI: 1548475072
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ALVAREZ, LISA J

Provider ID: 125378
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619) 515-2560
 Provider Gender: Female
 License number: NP19911
 NPI: 1417262718
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

AMER DAVIS, STACY K

Provider ID: 83186
 Board Certified Specialty: No
 UCSD EMERG PHYSICIANS

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP20267
NPI: 1750661641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARCANGEL, ANGEL I
Provider ID: 270380
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
995 GATEWAY CENTER WAY
STE 202
SAN DIEGO, CA 92102-4545
Phone: (619) 264-3107
Fax: (619) 264-6927
After Hours Phone: (619) 264-3107
Provider Gender: Female
License number: NP95012405
NPI: 1801319306
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BACANI, GRACE M
Provider ID: 256096
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95001006
NPI: 1093124703
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAKER, TANYA E
Provider ID: 255625
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021

Phone: (858) 534-8019
Fax:
After Hours Phone: (858) 534-8019
Provider Gender: Female
License number: NP95004209
NPI: 1699184259
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BALL, KELLY R
Provider ID: 110935
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95004819
NPI: 1902343833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 4168 FRONT ST
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BARBA, LAURA A

Provider ID: 109544
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: NP10291
NPI: 1700099645
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

BARBA, LAURA A

Provider ID: 255791
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-7496
Fax:
After Hours Phone: (619)
 543-7496
Provider Gender: Female
License number: NP10291
NPI: 1700099645
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

BARBA, LAURA A

Provider ID: 110350
Board Certified Specialty: No
 UCSD MEDICAL GROUP

Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

BARBA, LAURA A

Provider ID: 262151
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 410
 SAN DIEGO, CA 92123-4228
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858)
 966-4032
Provider Gender: Female
License number: NP10291
NPI: 1700099645
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

BELL, KAREN L

Provider ID: 83213

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP349853
NPI: 1982632758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BELL, KAREN L

Provider ID: 83214
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: NP349853
NPI: 1982632758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BENARD, ROBERT A

Provider ID: 268229
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95000121
NPI: 1184027724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, University Hsp Of San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BERNARDO-GREGORY, ELSIE S , NPA

Provider ID: 244829
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

9995 CARMEL MOUNTAIN RD
 STE B10
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Provider Gender: Female
License number: NP15257
NPI: 1588808349
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BERNARDO-GREGORY, ELSIE S , NPA

Provider ID: 244830
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9995 CARMEL MOUNTAIN RD
 STE B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Provider Gender: Female
License number: NP15257
NPI: 1588808349
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BIANCO, ANDREA D

Provider ID: 115264
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: NP22530
NPI: 1720326952
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BIANCO, ANDREA D

Provider ID: 115264
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: RN551574
NPI: 1720326952
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BILENKAYA, IRINA

Provider ID: 83240
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: NP15880
NPI: 1801030267
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Ukrainian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOLIVAR, NATALIE A

Provider ID: 268648
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8000
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8000
Provider Gender: Female
License number: NP95004672
NPI: 1083169296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
 Healthcare System Murrieta,
 Southwest Healthcare System
 Wildomar, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

BUCKLEY, MAUREEN D

Provider ID: 110384
Board Certified Specialty: No
 UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95001205
NPI: 1619377447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUENROSTRO, CHRISTINA

Provider ID: 243718
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95004366
NPI: 1851749253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAIN, JULIA M

Provider ID: 83250
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP18867
NPI: 1457593808
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CALLAHAN, ABIGAIL B

Provider ID: 102155
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY # 410
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6789
Fax:
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP95001371
NPI: 1649655317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CALLAHAN, ABIGAIL B

Provider ID: 287518
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST # 195
SAN DIEGO, CA 92123-2771
Phone: (858) 966-8974
Fax:
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: NP95001371
NPI: 1649655317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CAMARGO-LOWTHERS, ANGELICA M , NPA

Provider ID: 270981
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
License number: NP14412
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CAMARGO-LOWTHERS, ANGELICA M , NPA

Provider ID: 270981
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
License number: RN521048
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 54944
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
License number: NP14412
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

CAMARGO-LOWTHERS, ANGELICA M

Provider ID: 54944
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
License number: RN521048
NPI: 1912982539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

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D. Directorio de proveedores de atención especializada

CAPOZZI, JENNIFER E

Provider ID: 241031
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP11056
NPI: 1336258276
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CARRION GELABERT, ANA M

Provider ID: 262207
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: NP95000052

NPI: 1023178233
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHASE, AVA LOU C

Provider ID: 83281
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: NP95000602
NPI: 1164496386

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

CHAVEZ, ALEXANDRIA D

Provider ID: 243357
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR # 7
 SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95012447
NPI: 1811543622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOATE, BERNADETTE R

Provider ID: 286368
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR STE 2110
 SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: NP21945
 NPI: 1104173558
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CHOATE, BERNADETTE R
 Provider ID: 286369
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NP21945
 NPI: 1104173558
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

CHURCHMAN, CATHERINE M
 Provider ID: 277170
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5961
 Fax: (858) 966-6791
 After Hours Phone: (858)
 966-5961
 Provider Gender: Female
 License number: NP95016265
 NPI: 1407442049
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

COLLIER, SUMMER B
 Provider ID: 113776
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 2
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5415
 Fax:
 After Hours Phone: (619)
 543-5415
 Provider Gender: Female

License number: NP19943
 NPI: 1487964235
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COLLINS, ANGELINA E
 Provider ID: 123644
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Female
 License number: NP16516
 NPI: 1720001324
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

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D. Directorio de proveedores de atención especializada

COLLINS, CYNTHIA M <i>Provider ID:</i> 83299 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST FL 2 SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-5415 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-5415 <i>Provider Gender:</i> Female <i>License number:</i> NP17358 <i>NPI:</i> 1780869164 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	CONTILLO, AMBER L <i>Provider ID:</i> 260069 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-4930 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Female <i>License number:</i> NP95005629 <i>NPI:</i> 1154630838 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
CONNOR, CAROLINE L <i>Provider ID:</i> 279835 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP13032 <i>NPI:</i> 1609081710 <i>Provider English Spoken:</i> Yes	CONNOR, CAROLINE L <i>Provider ID:</i> 279836 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 6030 VILLAGE WAY SAN DIEGO, CA 92130-2972 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP13032 <i>NPI:</i> 1609081710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	COSINO, ANJELICA T <i>Provider ID:</i> 201309 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR FL 1 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP95008222 <i>NPI:</i> 1295238749

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

COUCH, SARA M

Provider ID: 113766
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: NP20894
NPI: 1851633507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CRONIN, ILEEN F

Provider ID: 289128
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: NP95016133
NPI: 1275919474
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CUTLER, APRYL L

Provider ID: 273326
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
Phone: (858) 966-5484
Fax:
After Hours Phone: (858)
 966-5484
Provider Gender: Female
License number: NP95012457

NPI: 1467960120

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DAVID, RHYS S

Provider ID: 260090
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: NP21537
NPI: 1790056166
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

DAVIES, SUMMER R

Provider ID: 253692
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 220
SAN DIEGO, CA 92122-1040
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP21519
NPI: 1679850671

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAVIS, JANET M

Provider ID: 255796
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9250
Fax: (619) 471-9275
After Hours Phone: (619) 471-9250

Provider Gender: Female
License number: NP95006617
NPI: 1164616280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DEUTSCH, KAREN G

Provider ID: 247980
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP19446
NPI: 1740517127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

DEUTSCH, KAREN G

Provider ID: 247981
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP19446
NPI: 1740517127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DINNALL, CHRISTINA M

Provider ID: 289133
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5888
Fax:
After Hours Phone: (858) 966-5888
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95005438
 NPI: 1831632843
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar
 Medical Center, Rady Childrens
 Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

DODD-SULLIVAN, REBECCA M

Provider ID: 112552
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Female
 License number: NP21994
 NPI: 1760823629
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA:
DOVE, JANET H
 Provider ID: 83367
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Female
 License number: NP8210
 NPI: 1982860664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DRISCOLL, KARRIE

Provider ID: 286345
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR
 STE 2110
 SAN DIEGO, CA 92122-1396
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NP22651

NPI: 1396085098
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DWYER, ERIN

Provider ID: 108501
 Board Certified Specialty: No
 GENESIS HEALTHCARE
 PARTNERS PC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
 Phone: (619) 297-4707
 Fax:
 After Hours Phone: (619)
 297-4707
 Provider Gender: Female
 License number: NP95004184
 NPI: 1003260894
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DWYER, ERIN, NPA

Provider ID: 269863
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
 Phone: (619) 297-4707
 Fax: (858) 429-7927
 After Hours Phone: (619) 297-4707
 Provider Gender: Female
 License number: NP95004184
 NPI: 1003260894

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ELMORE, DUDLEY G

Provider ID: 83410
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: NP18199
 NPI: 1568620375
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ERICKSON, LISA K

Provider ID: 278982
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95016319
 NPI: 1669442182
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ERICKSON, LISA K

Provider ID: 287444
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95016319
 NPI: 1669442182
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ESPEJO, MARISSA C

Provider ID: 121410
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 471-0320
 Fax:
 After Hours Phone: (619) 471-0320
 Provider Gender: Female
 License number: NP20343
 NPI: 1508112590
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ESPEJO, MARISSA C

Provider ID: 122175

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: NP20343

NPI: 1508112590

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ESTRELLA, SUE K

Provider ID: 127237

Board Certified Specialty: No
OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375

Phone: (844) 200-2426

Fax:

After Hours Phone: (844)

200-2426

Provider Gender: Female

License number: NP95005047

NPI: 1083137541

Provider English Spoken: Yes

Provider Language(s) Spoken:

Tagalog

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-4:30PM, SA
9AM-5PM

Website:

www.operationsamahan.org

Email:

Medical Group(s): Operation

Samahan - Mira Mesa

IPA:

FEITH, MEGAN M

Provider ID: 260520

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: NP95009508

NPI: 1912472754

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FEIZI, SEDI

Provider ID: 118629

Board Certified Specialty: No

SOUTHERN CALIFORNIA
INTERVENTIONAL ASSOC
995 GATEWAY CENTER WAY
STE 207

SAN DIEGO, CA 92102-4544

Phone: (619) 263-9729

Fax:

After Hours Phone: (619)

263-9729

Provider Gender: Female

License number: NP95002309

NPI: 1861889370

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLORES, ELEANOR A

Provider ID: 83432
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Female
License number: NP13994
NPI: 1730264250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FLOWERS, JEREMY R

Provider ID: 112525
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: NP15316
NPI: 1013913045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEBEN, CODY J

Provider ID: 244095
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: NP95008175
NPI: 1992179162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARCIA, DAVID

Provider ID: 78655
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: NP9111
NPI: 1851544480
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GARTH, MELISSA A

Provider ID: 274053
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95011870
NPI: 1689232977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GENNA, VINCENT T

Provider ID: 83461
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: NP19869
NPI: 1447554563
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GILBERT, TARI L

Provider ID: 103582
Board Certified Specialty: No

UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
 657-8000
Provider Gender: Female
License number: NP10378
NPI: 1811248347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GINGER, KRISTEN S

Provider ID: 261025
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: NP95002382
NPI: 1659646792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GIVENS, DENISE H

Provider ID: 287515
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
Phone: (858) 966-8974
Fax:
After Hours Phone: (858)
 966-8974
Provider Gender: Female
License number: NP14891
NPI: 1396810099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GODINO, DANIELLE E

Provider ID: 255948
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95005056
NPI: 1689125965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GODINO, DANIELLE E
Provider ID: 255949
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95005056
NPI: 1689125965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GODINO, DANIELLE E
Provider ID: 255950
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95005056
NPI: 1689125965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GONZALEZ, KYLA J
Provider ID: 261017

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: NP17058
NPI: 1548545494
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GRISSINGER, AMY E
Provider ID: 271415
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: NP95001570
NPI: 1649663824
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GRUBENSKY, LINDSAY T
Provider ID: 287687
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST STE 400
 SAN DIEGO, CA 92123-2753
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858)
 495-0500
Provider Gender: Female
License number: NP20953
NPI: 1619255577
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network
GUADARRAMA, IGNACIO
Provider ID: 262419
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 995 GATEWAY CENTER WAY
 STE 105
 SAN DIEGO, CA 92102-4544
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619)
 264-1934
Provider Gender: Male
License number: NP95003671
NPI: 1821331174
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
 Medical Group-Sd

HALDEMAN, SHYLAH M
Provider ID: 261030
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855

Provider Gender: Female
License number: NP95002511
NPI: 1497159495
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HARKNESS, RUMIKO
Provider ID: 208841
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP11566
NPI: 1487785093
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEAD, KRISTIN N

Provider ID: 268656
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: NP20264
NPI: 1699078923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HILLIARD, THESALONICA P

Provider ID: 284022
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426

Provider Gender: Female
License number: NP95010585
NPI: 1861956724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOOPER, BONNIE J , NPA

Provider ID: 275254
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858) 454-4300
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc

HOOPER, BONNIE J , NPA

Provider ID: 275255
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Female
License number: NP6495
NPI: 1821062878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HORNFELD, COURTNEY A

Provider ID: 277359
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95013375
NPI: 1982234027
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JENNINGS, CHARLES A

Provider ID: 112942
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: NP95000764
NPI: 1790186708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JONES, CHRISTA E

Provider ID: 275563

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP95914220
NPI: 1396371431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAUFMAN-SCIORTINO, JENNIFER B
Provider ID: 262125
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 6475 ALVARADO RD STE 120
 SAN DIEGO, CA 92120-5007
Phone: (619) 583-6133
Fax: (619) 583-0321
After Hours Phone: (619)
 583-6133
Provider Gender: Female
License number: NP17347
NPI: 1346435849
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KELLY, COLLEEN F

Provider ID: 262277
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858)
 966-8974
Provider Gender: Female
License number: NP95002304
NPI: 1578932190
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

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D. Directorio de proveedores de atención especializada

KELLY, COLLEEN F

Provider ID: 287511
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
 Phone: (858) 966-8974
 Fax:
 After Hours Phone: (858) 966-8974
 Provider Gender: Female
 License number: NP95002304
 NPI: 1578932190
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

KELLY, TARA M

Provider ID: 107336
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP95001320
 NPI: 1396995163

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KILLIAN-BENIGNO, CHRISTINA M

Provider ID: 105465
 Board Certified Specialty: No
 CHILDRENS HOSP SAN DIEGO
 CHADWICK CTR
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5811
 Fax:
 After Hours Phone: (858) 966-5811
 Provider Gender: Female
 License number: NP21551
 NPI: 1962772970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health
 Network

KILLIAN-BENIGNO, CHRISTINA M

Provider ID: 262276
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5811
 Fax: (858) 966-8035
 After Hours Phone: (858) 966-5811
 Provider Gender: Female
 License number: NP21551
 NPI: 1962772970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

KIRK, MARY P

Provider ID: 83658
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: NP17276

NPI: 1760668073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KLEIN, SUSAN H

Provider ID: 286748

Board Certified Specialty: No

COMMUNITY CARE IPA LLC
3703 CAMINO DEL RIO S STE
210

SAN DIEGO, CA 92108-4033

Phone: (619) 640-5555

Fax: (619) 640-5550

After Hours Phone: (619)
640-5555

Provider Gender: Female

License number: NP23266

NPI: 1831522010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KNECHEL, NANCY A

Provider ID: 83659

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: NP17401

NPI: 1871757211

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KNIGHT, TARA J

Provider ID: 276446

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: NP95012285

NPI: 1801394358

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KOTULA, KELLY E

Provider ID: 268922

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3665 KEARNY VILLA RD STE
400

SAN DIEGO, CA 92123-1955

Phone: (858) 966-8801

Fax: (858) 966-7803

After Hours Phone: (858)

966-8801

Provider Gender: Female

License number: NP95012078

NPI: 1518519305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NP95001036 NPI: 1538578307 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
KUKULJ, ANA V Provider ID: 110849 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: NP95001490 NPI: 1063800316 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	LE FLOCH, NATHALIE M Provider ID: 262126 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3010 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5811 Fax: (858) 966-8035 After Hours Phone: (858) 966-5811 Provider Gender: Female License number: NP15079 NPI: 1689709271 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: 0/99	LEBLANC, ALLYN E Provider ID: 275538 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: NP95004227 NPI: 1376732685 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
LAFORTEZA, JOZELLE B Provider ID: 202666 Board Certified Specialty: No UCSD MEDICAL GROUP 9333 GENESEE AVE STE 200 SAN DIEGO, CA 92121-2113		LEBLANC, SHANNON K Provider ID: 125813 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (888) 309-8273
 Fax:
 After Hours Phone: (888) 309-8273
 Provider Gender: Female
 License number: NP95003982
 NPI: 1073053179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LEBLANC, SHANNON K

Provider ID: 127300
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP95003982
 NPI: 1073053179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA:
LEE, RACHAEL O
 Provider ID: 278005
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95009773
 NPI: 1205318920
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LEVY, SHARON B

Provider ID: 262166
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 5776 RUFFIN RD
 SAN DIEGO, CA 92123-1013

Phone: (858) 292-1144
 Fax:
 After Hours Phone: (858) 292-1144
 Provider Gender: Female
 License number: NP95003383
 NPI: 1316396807
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/99
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LIEBMAN, RACHAEL R

Provider ID: 280389
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95007834
 NPI: 1396130050
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	NETWORK 3030 CHILDRENS WAY FL 2 NORTH SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-5961 <i>Fax:</i> (858) 966-6791 <i>After Hours Phone:</i> (858) 966-5961 <i>Provider Gender:</i> Female <i>License number:</i> NP14008 <i>NPI:</i> 1003954116 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
LIM, IMELDA B <i>Provider ID:</i> 99317 <i>Board Certified Specialty:</i> No OPERATION SAMAHAN - MIRA MESA 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> <i>After Hours Phone:</i> (844) 200-2426 <i>Provider Gender:</i> Female <i>License number:</i> NP95000203 <i>NPI:</i> 1093130395 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-4:30PM, SA 9AM-5PM <i>Website:</i> www.operationsamahan.org <i>Email:</i> <i>Medical Group(s):</i> Operation Samahan - Mira Mesa <i>IPA:</i>	LUCKETT, DE COURCY E <i>Provider ID:</i> 271115 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3520 4TH AVE SAN DIEGO, CA 92103-4913 <i>Phone:</i> (714) 619-8777 <i>Fax:</i> <i>After Hours Phone:</i> (714) 619-8777 <i>Provider Gender:</i> Female <i>License number:</i> NP95000435 <i>NPI:</i> 1023410578 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No	LUX, PAULYNE <i>Provider ID:</i> 126210 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (858) 657-7000 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-7000 <i>Provider Gender:</i> Female <i>License number:</i> NP23162 <i>NPI:</i> 1255763942 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Tagalog <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
LOPEZ, SARA O <i>Provider ID:</i> 265119 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH		LU, TAMMY C <i>Provider ID:</i> 123683 <i>Board Certified Specialty:</i> No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: NP95007253
NPI: 1457879132
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAGLIOCCA, MICHAEL A
Provider ID: 113336
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (844) 757-5337
Fax:
After Hours Phone: (844)
757-5337
Provider Gender: Male
License number: NP8830
NPI: 1821063538
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARCELO, ALLISON J
Provider ID: 116525
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP95001387
NPI: 1760887194
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Sharp Coronado
Hosp And Healthcare Ctr, Ucsd
La Jolla John Sally Thornton,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARSHALL, KIMBERLY J
Provider ID: 102304
Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY # 5008
MC
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: NP95002840
NPI: 1508204090
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MARTINEZ, JOYCELLE C
Provider ID: 84009
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 657-8530
After Hours Phone: (619)
543-6248
Provider Gender: Female
License number: NP16021
NPI: 1891906228
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MCQUINN, ELIZABETH A

Provider ID: 125596
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8974
Fax:
After Hours Phone: (858)
 966-8974
Provider Gender: Female
License number: NP95005300
NPI: 1922512318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
 Network
MCQUINN, ELIZABETH A
Provider ID: 262249
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
 966-8800

Provider Gender: Female
License number: NP95005300
NPI: 1922512318
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MELTZER, VIRGINIA N

Provider ID: 287395
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 350 DICKINSON ST
 SAN DIEGO, CA 92103-1913

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: NP95015948
NPI: 1821684390
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEYER, DAWN M

Provider ID: 84131
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: NP15769
NPI: 1467575126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No 📞 Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: MICHAEL, GEORGINA M Provider ID: 84132 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: NP13763 NPI: 1780825679 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No 📞 Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: MILLER, EVA M Provider ID: 255833 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108	Phone: (619) 471-9210 Fax: After Hours Phone: (619) 471-9210 Provider Gender: Female License number: NP8121 NPI: 1043492523 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No 📞 Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group MIRANDA, ADRIANNA R Provider ID: 283729 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5818 Fax: (858) 966-7483 After Hours Phone: (858) 966-5818 Provider Gender: Female License number: NP14263 NPI: 1316271570 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: 18/999	American Sign Language (ASL): No 📞 Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network MIRANDA, BRIDGET A Provider ID: 127249 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 Phone: (858) 966-7484 Fax: After Hours Phone: (858) 966-7484 Provider Gender: Female License number: NP95006082 NPI: 1225548159 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No 📞 Accessibility: P, EB, IB, E, R, T, W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network MIRANDA, BRIDGET A Provider ID: 262338 Board Certified Specialty: No
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK

7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484

Fax:

After Hours Phone: (858)
966-7484

Provider Gender: Female

License number: NP95006082

NPI: 1225548159

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MIRANDA, BRIDGET A

Provider ID: 262341

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

8110 BIRMINGHAM WAY BLDG
28

SAN DIEGO, CA 92123-2758

Phone: (858) 966-8052

Fax:

After Hours Phone: (858)

966-8052

Provider Gender: Female

License number: NP95006082

NPI: 1225548159

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MISEL, TINA J

Provider ID: 110428

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR # 7

SAN DIEGO, CA 92121-3021

Phone: (858) 657-8071

Fax:

After Hours Phone: (858)

657-8071

Provider Gender: Female

License number: NP9990

NPI: 1912011347

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MOHEBBI, ATHENA

Provider ID: 201325

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121-3028

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP19120

NPI: 1952627176

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MORENO, MANUEL

Provider ID: 116132

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-5743

Fax:

After Hours Phone: (619)

543-5743

Provider Gender: Male

License number: NP22268

NPI: 1275991929

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NEJATI, FRESHTA

Provider ID: 214112
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9909 MIRA MESA BLVD STE 200
 SAN DIEGO, CA 92131-1061
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95001514
 NPI: 1831598119
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NGUYEN, MY HANH T

Provider ID: 110207
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

4168 FRONT ST # 1A
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6303
 Fax:
 After Hours Phone: (619) 543-6303
 Provider Gender: Female
 License number: NP23129
 NPI: 1598950651
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NOCEDA, ANA B

Provider ID: 262231
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: NP19505
 NPI: 1386971760
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NORTON, SARAH E

Provider ID: 207059
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP95010335
 NPI: 1730659756
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NOVENO, HILARIO C

Provider ID: 286911
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95010779
NPI: 1124486865
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NOVENO, HILARIO C

Provider ID: 286912
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: NP95010779
NPI: 1124486865
Provider English Spoken: Yes
Provider Language(s) Spoken:

Tagalog

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OFLAHERTY-KEESE, KATE M

Provider ID: 262329
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8010 FROST ST STE 502
 SAN DIEGO, CA 92123-4222
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Female
License number: NP12100
NPI: 1144417726
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OFLAHERTY-KEESE, KATE M

Provider ID: 81394
Board Certified Specialty: No
 CHILDRENS HOSP SAN DIEGO CHADWICK CTR
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP12100
NPI: 1144417726
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ORPILLA, IMELDA M

Provider ID: 127158
Board Certified Specialty: No
 OPERATION SAMAHAN RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax:
After Hours Phone: (844) 200-2426
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM,
 SA 9AM-5PM
 Website:
 www.operationsamahan.org
 Email:
 Medical Group(s): Operation
 Samahan Rancho Penasquitos
 IPA: Community Care Ipa Llc

ORPILLA, IMELDA M , NPA
 Provider ID: 243506
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9995 CARMEL MOUNTAIN RD #
 B10-B11
 SAN DIEGO, CA 92129-2889
 Phone: (844) 200-2426
 Fax:
 After Hours Phone: (844)
 200-2426
 Provider Gender: Female
 License number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ORPILLA, IMELDA M
 Provider ID: 282962
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844)
 200-2426
 Provider Gender: Female
 License number: NP95003211
 NPI: 1790785988
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PADILLA, KIMBERLY C
 Provider ID: 262458
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789
 Fax: (858) 576-8412
 After Hours Phone: (858)
 966-6789
 Provider Gender: Female
 License number: NP95010468
 NPI: 1639649239
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PADILLA, KIMBERLY C
 Provider ID: 262459
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-6789
 Fax: (858) 576-8412
 After Hours Phone: (858)
 966-6789
 Provider Gender: Female
 License number: NP95010468
 NPI: 1639649239
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 7910 FROST ST # 195
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PAI, SARAH A

Provider ID: 276870
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 350 DICKINSON ST
 SAN DIEGO, CA 92103-1913
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARKER, ANDREA L

Provider ID: 287526
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: NP17208
NPI: 1821311804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARK, SUN MIN

Provider ID: 262377
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARK, SUN MIN

Provider ID: 262378
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: NP20538
NPI: 1376678250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PARK, SUN MIN

Provider ID: 262379

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
410

SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Female

License number: NP20538

NPI: 1376678250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PARNELL, TANIKA E

Provider ID: 255551

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)
966-8800

Provider Gender: Female

License number: NP95013165

NPI: 1679121750

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PARNELL, TANIKA E

Provider ID: 287646

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

12036 SCRIPPS HIGHLANDS
DR # 102

SAN DIEGO, CA 92131-5155

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858)

566-4444

Provider Gender: Female

License number: NP95013165

NPI: 1679121750

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PARNELL, TANIKA E

Provider ID: 287648

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

11943 EL CAMINO REAL STE
210

SAN DIEGO, CA 92130-2597

Phone: (858) 793-1011

Fax: (858) 793-1035

After Hours Phone: (858)

793-1011

Provider Gender: Female

License number: NP95013165

NPI: 1679121750

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PASTERNAK, ANNA

Provider ID: 279593

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)

280-2905

Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: NP95016490
NPI: 1508459496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PATEL, KELLY M

Provider ID: 110294
Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
 515-2444
Provider Gender: Female
License number: NP95004735
NPI: 1033493747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM,
 TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): Family Hlth Ctr
 San Diego-Beach Area
IPA:

PENA LEDON, GILBERTO

Provider ID: 120284
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: NP22396
NPI: 1447598354
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PENA LEDON, GILBERTO

Provider ID: 120286
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030

Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: NP22396
NPI: 1447598354
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PENA LEDON, GILBERTO

Provider ID: 270084
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4520 EXECUTIVE DR # CL
 SAN DIEGO, CA 92121-3018
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: NP22396
NPI: 1447598354
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEREZ, ALLYSSA M

Provider ID: 286222
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95015479
NPI: 1497358915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEREZ, ALLYSSA M

Provider ID: 286223
Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95015479
NPI: 1497358915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PETER-TRUEDELL, JILLIAN

Provider ID: 276460
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130-2597
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858) 793-1011
Provider Gender: Female
License number: NP21205
NPI: 1518247436
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PETTIS, BETH S

Provider ID: 286878
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95016003
NPI: 1326638958
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHILLIPS, KELLY M

Provider ID: 84327
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (888) 309-8273

Fax:
After Hours Phone: (888)
309-8273

Provider Gender: Female
License number: NP18868
NPI: 1336370543

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

PIATKOWSKI, BRIAN A

Provider ID: 84329
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: NP20954
NPI: 1366703233

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

PROWSE, KAYLEIGH M

Provider ID: 271425
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961

Fax: (858) 966-6791
After Hours Phone: (858)
966-5961

Provider Gender: Female
License number: NP22923
NPI: 1316571367

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

PRUETT, ZHIKE

Provider ID: 76608
Board Certified Specialty: No
BALBOA NEPHROLOGY MED

GRP INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350

Fax:
After Hours Phone: (619)
299-2350

Provider Gender: Female
License number: NP22373
NPI: 1295086262

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, IB, E
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

REINER, GAIL E

Provider ID: 262382
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052

Fax: (858) 966-7789
After Hours Phone: (858)
966-8052

Provider Gender: Female
License number: NP13630
NPI: 1710167853

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Diego, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

REINER, GAIL E

Provider ID: 284946

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121-3069

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: NP13630

NPI: 1710167853

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San

Diego, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

REINER, GAIL E

Provider ID: 82165

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY # 5008

MC

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: NP13630

NPI: 1710167853

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San

Diego, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

REUTER, GIANA D

Provider ID: 105705

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax:

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: NP16763

NPI: 1437483914

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

REUTER, GIANA D

Provider ID: 262437

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 4

NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: NP16763

NPI: 1437483914

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RICHARDS, LISA M

Provider ID: 84582
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 2
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5415
 Fax:
 After Hours Phone: (619) 543-5415
 Provider Gender: Female
 License number: NP8458
 NPI: 1720247612
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

RIEGO, SUZANNE N

Provider ID: 214477
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3750 CONVOY ST STE 312
 SAN DIEGO, CA 92111-3741

Phone: (858) 292-7200
 Fax:
 After Hours Phone: (858) 292-7200
 Provider Gender: Female
 License number: NP18212
 NPI: 1144453754
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RIPP, CHERYL L

Provider ID: 264955
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-8052
 Fax: (858) 966-7789
 After Hours Phone: (858) 966-8052
 Provider Gender: Female
 License number: NP95000092
 NPI: 1376972174
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18

American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RIPP, CHERYL L

Provider ID: 97416
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-5855
 Fax:
 After Hours Phone: (858) 966-5855
 Provider Gender: Female
 License number: NP95000092
 NPI: 1376972174
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RIVIELLO, GABRIELA

Provider ID: 84587
 Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP13576
NPI: 1871758508
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTSON, RACHAEL A
Provider ID: 286940
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95015675
NPI: 1659912327
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RODRIGUEZ, NATALY E
Provider ID: 275649
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8801
Fax: (858) 966-7508
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95010299
NPI: 1558839837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROSS, CRYSTAL H
Provider ID: 287763
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST

SAN DIEGO, CA 92103-1913
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95015413
NPI: 1548683378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAVILLE, EDITH F
Provider ID: 109941
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Female
License number: NP7374
NPI: 1730567678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SCOTT, ILEANA E

Provider ID: 264608
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: NP14157
NPI: 1821142803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 262838
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 262839
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT, MARYLOU

Provider ID: 262840
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: NP10261
NPI: 1023223252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SEARS-WILEY, ELIZABETH

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D. Directorio de proveedores de atención especializada

Provider ID: 276851
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP95007257
NPI: 1215394382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SEBRING, JAN A
Provider ID: 101721
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: RN486421
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEBRING, JAN A
Provider ID: 101721
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: NP10906
NPI: 1295750339
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEKERES, JADE L
Provider ID: 289130
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: NP95012149
NPI: 1487208252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SELBY, BLAKE A
Provider ID: 246423
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP18112
NPI: 1417194358
Provider English Spoken: Yes
Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SELBY, BLAKE A

Provider ID: 256646
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NP18112
NPI: 1417194358
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
SHACKELFORD, JENNIFER L
Provider ID: 116986
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95004457
NPI: 1518202944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SHACKELFORD, JENNIFER L
Provider ID: 116986
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: NP95004457
NPI: 1518202944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHELDON, ELIZABETH P
Provider ID: 105742
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female

License number: NP95003217
NPI: 1336511831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SHELDON, ELIZABETH P
Provider ID: 262747
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY # 2-WEST
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: NP95003217
NPI: 1336511831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

SHUMAKOVA, ALINA

Provider ID: 270583
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: NP95008524
NPI: 1083116321
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SILVA, MICHELLE L

Provider ID: 264529
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: NP22781
NPI: 1891036448
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SILVA, MICHELLE L

Provider ID: 92079
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: NP22781
NPI: 1891036448
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SILVESTRO, ELISA S

Provider ID: 118690
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Female
License number: NP95005103
NPI: 1548302011
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITH, ELIZABETH W

Provider ID: 287506
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

7910 FROST ST # 195
SAN DIEGO, CA 92123-2771
Phone: (858) 966-8974
Fax:
After Hours Phone: (858)
966-8974
Provider Gender: Female
License number: NP95006872
NPI: 1568953172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SMITH, HEIDI A

Provider ID: 84817
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: NP8236
NPI: 1992950539
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOTO, ROBIN J

Provider ID: 110448
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOTO, ROBIN J

Provider ID: 80434
Board Certified Specialty: No
SHERMAN HEIGHTS FAMILY
HLTH CTRS INC
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941

Phone: (619) 515-2435
Fax:
After Hours Phone: (619)
515-2435
Provider Gender: Female
License number: NP11778
NPI: 1487688099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s): Sherman
Heights Family Hlth Ctrs Inc
IPA:

SOX, REBECCA L

Provider ID: 102397
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3665 KEARNY VILLA RD STE
400
SAN DIEGO, CA 92123-1955
Phone: (858) 966-8801
Fax:
After Hours Phone: (858)
966-8801
Provider Gender: Female
License number: NP14589
NPI: 1053519850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SOX, REBECCA L
Provider ID: 263650
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7869
Fax: (619) 543-7543
After Hours Phone: (619)
543-7869
Provider Gender: Female
License number: NP14589
NPI: 1053519850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network
SOX, REBECCA L
Provider ID: 263651
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3665 KEARNY VILLA RD
SAN DIEGO, CA 92123-1953
Phone: (858) 966-5382
Fax: (858) 966-6733
After Hours Phone: (858)
966-5382
Provider Gender: Female
License number: NP14589
NPI: 1053519850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SOX, REBECCA L
Provider ID: 88214
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 543-7869
Fax:
After Hours Phone: (619)
543-7869
Provider Gender: Female
License number: NP14589
NPI: 1053519850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SPIES, JEANIE M
Provider ID: 263928
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP4891
NPI: 1861688756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SPIES, JEANIE M

Provider ID: 85883

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FN D TN

3020 CHILDRENS WAY # 5008

MC

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: NP4891

NPI: 1861688756

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

STANGL, LISA

Provider ID: 84903

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 400

SAN DIEGO, CA 92103-2108

Phone: (619) 543-8089

Fax:

After Hours Phone: (619)

543-8089

Provider Gender: Female

License number: NP5599

NPI: 1902864580

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

STEARNS, PHILIP H

Provider ID: 265077

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY STE

410

SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Male

License number: NP11899

NPI: 1609900810

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

STEARNS, PHILIP H

Provider ID: 265078

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 190

SAN DIEGO, CA 92123-2731

Phone: (858) 966-9360

Fax: (858) 966-8519

After Hours Phone: (858)

966-9360

Provider Gender: Male

License number: NP11899

NPI: 1609900810

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

STEARNS, PHILIP H

Provider ID: 265079
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: NP11899
NPI: 1609900810
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

STEPHENSON, CARA LEE

Provider ID: 265236
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 120
 SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Female

License number: NP16262
NPI: 1245416296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

STEPHENSON, CARA LEE

Provider ID: 80610
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: NP16262
NPI: 1245416296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

SWARTZ, ERIN

Provider ID: 255787
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (858) 657-8530
Fax:
After Hours Phone: (858) 657-8530
Provider Gender: Female
License number: NP95011666
NPI: 1639571292
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TAING, JENNIFER S

Provider ID: 201573
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: NP22002
 NPI: 1649528357
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: University Of California Irvine Med Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TALBOT, ADRIANNE V
 Provider ID: 278183
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST # 1A
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP17553
 NPI: 1992048557
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Ucsd Medical Group
TANGTUMNU, RUNGFA
 Provider ID: 84922
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: NP17451
 NPI: 1689828741
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

TAYLOR, KAYLA L
 Provider ID: 124031
 Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2525
 Fax:
 After Hours Phone: (619) 515-2525
 Provider Gender: Female
 License number: NP95006792
 NPI: 1730604414

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr San Diego- City College
 IPA:

THOMPSON, COURTNEY J
 Provider ID: 112483
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-3995
 Fax:
 After Hours Phone: (619) 543-3995
 Provider Gender: Female
 License number: NP95001073
 NPI: 1629487285
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA:	Provider English Spoken: Yes	
	Provider Language(s) Spoken:	TOROK, ELIZABETH M
THRASHER, JULIA A	Spanish	Provider ID: 265129
Provider ID: 121886	Cultural Competency: No	Board Certified Specialty: No
Board Certified Specialty: No	Hospital Affiliation: Ucsd Medical	RADY CHILDRENS HEALTH
UCSD MEDICAL GROUP	Ctr, Ucsd La Jolla John Sally	NETWORK
200 W ARBOR DR	Thornton	3010 CHILDRENS WAY #
SAN DIEGO, CA 92103-1911	Medi-Cal Open Panel: No	2-WEST
Phone: (619) 543-6222	Min/Max Age: None	SAN DIEGO, CA 92123-4223
Fax:	American Sign Language (ASL):	Phone: (858) 966-5811
After Hours Phone: (619)	No	Fax: (858) 966-8035
543-6222	♿ Accessibility:	After Hours Phone: (858)
Provider Gender: Female	Hours: M-SA 9AM-5PM	966-5811
License number: NP95007258	Website:	Provider Gender: Female
NPI: 1073031993	Email:	License number: NP21326
Provider English Spoken: Yes	Medical Group(s):	NPI: 1386901700
Provider Language(s) Spoken:	IPA:	Provider English Spoken: Yes
Cultural Competency: No		Provider Language(s) Spoken:
Hospital Affiliation: Ucsd La Jolla	TOPPEN, LAURA	Cultural Competency: No
John Sally Thornton, Ucsd	Provider ID: 215477	Hospital Affiliation:
Medical Ctr	Board Certified Specialty: No	Medi-Cal Open Panel: No
Medi-Cal Open Panel: No	UCSD MEDICAL GROUP	Min/Max Age: 0/99
Min/Max Age: None	200 W ARBOR DR	American Sign Language (ASL):
American Sign Language (ASL):	SAN DIEGO, CA 92103-1911	No
No	Phone: (800) 926-8273	♿ Accessibility:
♿ Accessibility: W	Fax:	Hours: M-SA 9AM-5PM
Hours: M-SA 9AM-5PM	After Hours Phone: (800)	Website:
Website:	926-8273	Email:
Email:	Provider Gender: Female	Medical Group(s):
Medical Group(s):	License number: NP95010163	IPA: Rady Childrens Health
IPA:	NPI: 1326563495	Network
	Provider English Spoken: Yes	
TOPEROFF, WILL E	Provider Language(s) Spoken:	TURNER, ELIZABETH A
Provider ID: 84926	Cultural Competency: No	Provider ID: 255601
Board Certified Specialty: No	Hospital Affiliation:	Board Certified Specialty: No
UCSD MEDICAL GROUP	Medi-Cal Open Panel: Yes	UCSD MEDICAL GROUP
4168 FRONT ST	Min/Max Age: 0/999	4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92103-2030	American Sign Language (ASL):	SAN DIEGO, CA 92121-3029
Phone: (619) 543-3995	No	Phone: (858) 534-8019
Fax:	♿ Accessibility:	Fax:
After Hours Phone: (619)	Hours: M-SA 9AM-5PM	After Hours Phone: (858)
543-3995	Website:	534-8019
Provider Gender: Male	Email:	Provider Gender: Female
License number: NP14178	Medical Group(s):	License number: NP95009547
NPI: 1013103472	IPA: Ucsd Medical Group	NPI: 1326570045

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VALENCIANO, MARCI J

Provider ID: 263001
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: NP20033
NPI: 1093780421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network
VALLES, ELIZABETH A
Provider ID: 108406
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3665 KEARNY VILLA RD STE 400
 SAN DIEGO, CA 92123-1955
Phone: (858) 966-8801
Fax:
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95002921
NPI: 1609235589
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VALLES, ELIZABETH A
Provider ID: 263033
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3665 KEARNY VILLA RD STE 400
 SAN DIEGO, CA 92123-1955

Phone: (858) 966-8801
Fax: (858) 966-8528
After Hours Phone: (858) 966-8801
Provider Gender: Female
License number: NP95002921
NPI: 1609235589
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VEGA, TERESA

Provider ID: 95372
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: NP95001705
NPI: 1912304569
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Phone:</i> (619) 264-3107 <i>Fax:</i> (619) 264-6927 <i>After Hours Phone:</i> (619) 264-3107 <i>Provider Gender:</i> Female <i>License number:</i> NP95006319 <i>NPI:</i> 1508307364 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
VIBAL-POASTER, MARIA K <i>Provider ID:</i> 205651 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> NP95008661 <i>NPI:</i> 1376046680 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	WILLEY, MARTI L , NPA <i>Provider ID:</i> 256421 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Female <i>License number:</i> NP22548 <i>NPI:</i> 1144574062 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/120 <i>American Sign Language (ASL):</i>	WILLIAMS, BREAHA A <i>Provider ID:</i> 115124 <i>Board Certified Specialty:</i> No LA MAESTRA FAMILY CLINIC INC 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 <i>Phone:</i> (619) 255-9155 <i>Fax:</i> <i>After Hours Phone:</i> (619) 255-9155 <i>Provider Gender:</i> Female <i>License number:</i> NP95001840 <i>NPI:</i> 1063884864 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> www.lamaestra.org <i>Email:</i> <i>Medical Group(s):</i> La Maestra Family Clinic Inc <i>IPA:</i>
WATSON, CHRISTINE M <i>Provider ID:</i> 270000 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 995 GATEWAY CENTER WAY STE 202 SAN DIEGO, CA 92102-4545	WOUDSTRA, JOCELYN <i>Provider ID:</i> 283535 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858)
966-8574
Provider Gender: Female
License number: NP95017397
NPI: 1609261965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YEH-NAYRE, LANIPUA A

Provider ID: 262455
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3010 CHILDRENS WAY BLDG 2
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP17336
NPI: 1417157819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YEH-NAYRE, LANIPUA A

Provider ID: 82992
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
966-5811
Provider Gender: Female
License number: NP17336
NPI: 1417157819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZENDEJAS, CATHERINE T

Provider ID: 279271
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
6475 ALVARADO RD STE 120
SAN DIEGO, CA 92120-5007
Phone: (619) 583-6133
Fax: (619) 583-0321
After Hours Phone: (619)
583-6133
Provider Gender: Female
License number: NP95016516
NPI: 1639590326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CERTIFIED REGISTERED **NURSE MIDWIFE**

BOSTON, LAURA H

Provider ID: 25671
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax: (619) 269-0053
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: NM792

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1174553259

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

COOPER, ANNE S

Provider ID: 83306

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-6792

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NM1689

NPI: 1477644417

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DOLLAND, STEVEN C

Provider ID: 280552

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: NA95000632

NPI: 1982059044

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Kern Medical

Center, Ucsd Medical Ctr, Ucsd

La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EKHOLM, JANNA L

Provider ID: 122017

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax:

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NM1894

NPI: 1588977151

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GARRETT BROWN, REBECCA C

Provider ID: 83460

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-6792

After Hours Phone: (619)

543-7878

Provider Gender: Female

License number: NMW862

NPI: 1659344224

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GEPSHTEIN, YANA

Provider ID: 52244
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 3690 MISSION BLVD
 SAN DIEGO, CA 92109-7368
Phone: (619) 876-4420
Fax: (619) 269-0053
After Hours Phone: (619) 876-4420
Provider Gender: Female
License number: NM1662
NPI: 1396956512
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOODWIN, RACHEL K

Provider ID: 210018
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NM1908
NPI: 1518274919
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GOODWIN, RACHEL K

Provider ID: 210019
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NM1908
NPI: 1518274919
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

GREAR MANN, MELISSA P

Provider ID: 210052
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NMW1830
NPI: 1255384475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GREAR MANN, MELISSA P

Provider ID: 210053
Board Certified Specialty: No
UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: NMW1830
NPI: 1255384475
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (888) 309-8273 Fax: After Hours Phone: (888) 309-8273 Provider Gender: Female License number: NM1421 NPI: 1285667741 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
GUNTHER, HOPE R Provider ID: 210041 Board Certified Specialty: No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: NM1421 NPI: 1285667741 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	HIRSCH, JENNIFER S Provider ID: 210054 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-7878 Fax: After Hours Phone: (619) 543-7878 Provider Gender: Female License number: NMW970 NPI: 1891752069 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	HIRSCH, JENNIFER S Provider ID: 210055 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-7878 Fax: After Hours Phone: (619) 543-7878 Provider Gender: Female License number: NMW970 NPI: 1891752069 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
GUNTHER, HOPE R Provider ID: 83523 Board Certified Specialty: No	HIRSCH, JENNIFER S Provider ID: 210058 Board Certified Specialty: No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIRSCH, JENNIFER S

Provider ID: 83593
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (888) 309-8273
 Fax:
 After Hours Phone: (888) 309-8273
 Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIRSCH, JENNIFER S
 Provider ID: 83595
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-7878
 Fax: (619) 543-6792
 After Hours Phone: (619) 543-7878
 Provider Gender: Female
 License number: NMW970
 NPI: 1891752069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210134
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878
 Fax: (619) 543-2366
 After Hours Phone: (619) 543-7878
 Provider Gender: Female
 License number: NM1061
 NPI: 1518916857
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 210137
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NM1061
 NPI: 1518916857
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PERDION, KAREN L

Provider ID: 84323
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-2366
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: NM1061
NPI: 1518916857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TIMPE, BETH K

Provider ID: 84924
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030

Phone: (619) 543-6790
Fax:
After Hours Phone: (619) 543-6790
Provider Gender: Female
License number: NM1598
NPI: 1336209428
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VU, ERICA T

Provider ID: 84942
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2366
Fax: (619) 543-2366
After Hours Phone: (619) 543-2366
Provider Gender: Female
License number: NM1848
NPI: 1578890737
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VU, ERICA T

Provider ID: 84942
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2366
Fax: (619) 543-2366
After Hours Phone: (619) 543-2366
Provider Gender: Female
License number: NP18891
NPI: 1578890737
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHIROPRACTOR

BUI, MAI T

Provider ID: 125052
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

5354 UNIVERSITY AVE # 3
SAN DIEGO, CA 92105-2204
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619)
692-3211
Provider Gender: Female
License number: DC31634
NPI: 1780901264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BUI, MAI T

Provider ID: 217595
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
10717 CAMINO RUIZ STE 238
SAN DIEGO, CA 92126-2364
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619)
692-3211
Provider Gender: Female
License number: DC31634
NPI: 1780901264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

LUU, DANIEL Q

Provider ID: 269883
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115-4564
Phone: (619) 287-1235
Fax: (619) 566-3553
After Hours Phone: (619)
287-1235
Provider Gender: Male
License number: DC26096
NPI: 1225108269
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROJAS, RICHARD J

Provider ID: 109528
Board Certified Specialty: No
FAMILY HLTH CTR SD

HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
515-2545
Provider Gender: Male
License number: DC31024
NPI: 1538318811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-TH 8AM-9PM, F
8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
Sd Hillcrest
IPA:

DERMATOLOGY

BOEN, MONICA

Provider ID: 129041
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119
Phone: (858) 454-4300
Fax:
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BOEN, MONICA, MD

Provider ID: 269740
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9339 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
 454-4300
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BOEN, MONICA, MD

Provider ID: 269741

Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619)
 298-9809
Provider Gender: Female
License number: A149554
NPI: 1508203563
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Polish, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BROUHA, BROOK L

Provider ID: 115451
Board Certified Specialty: No
 WEST DERMATOLOGY AND
 SURG MED GRP
 9339 GENESEE AVE # 350A
 SAN DIEGO, CA 92121-2119
Phone: (858) 263-0571
Fax:
After Hours Phone: (858)
 263-0571
Provider Gender: Male
License number: A97902
NPI: 1114173937
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No

Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BROUHA, BROOK L , MD

Provider ID: 267943
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 9339 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
 454-4300
Provider Gender: Male
License number: A97902
NPI: 1114173937
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

CALAME, ANTOANELLA

Provider ID: 109337

Board Certified Specialty: No
COMPASS

DERMATOPATHOLOGY INC
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121-2253
Phone: (858) 750-2983

Fax:

After Hours Phone: (858)
750-2983

Provider Gender: Female

License number: A84455

NPI: 1285817569

Provider English Spoken: Yes

Provider Language(s) Spoken:

Romanian

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DINARDO, ANNA

Provider ID: 83359

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
STE 350

SAN DIEGO, CA 92122-1010

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)
657-8322

Provider Gender: Female

License number: A104854

NPI: 1992873673

Provider English Spoken: Yes

Provider Language(s) Spoken:
Italian

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DOHIL, MAGDALENE A

Provider ID: 242290

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6795

Fax:

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A86265

NPI: 1528139383

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

DOHIL, MAGDALENE A

Provider ID: 277244

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-6795

Fax: (858) 966-7479

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A86265

NPI: 1528139383

Provider English Spoken: Yes

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

DORSCHNER, ROBERT A

Provider ID: 116640

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN

STE 350

SAN DIEGO, CA 92122-1010

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Male

License number: A128567

NPI: 1306103924

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DORSCHNER, ROBERT A

Provider ID: 272945

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN

STE 350

SAN DIEGO, CA 92122-1010

Phone: (858) 657-8322

Fax:

After Hours Phone: (858)

657-8322

Provider Gender: Male

License number: A128567

NPI: 1306103924

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EICHENFIELD, DAWN Z

Provider ID: 283142

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-6795

Fax: (858) 966-7479

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A150792

NPI: 1295198091

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

EICHENFIELD, LAWRENCE F

Provider ID: 242242

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6795

Fax:

After Hours Phone: (858)

966-6795

Provider Gender: Male

License number: G69132

NPI: 1477624138

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Ucsd

Medical Ctr, Childrens Hospital

Of Orange County, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

EICHENFIELD, LAWRENCE F

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 51947
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8010 FROST ST STE 602
SAN DIEGO, CA 92123-4204
Phone: (858) 966-6795
Fax:
After Hours Phone: (858) 966-6795
Provider Gender: Male
License number: G69132
NPI: 1477624138
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ELSENSOHN, ASHLEY N
Provider ID: 272777
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122-1010

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A148423
NPI: 1467847905
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FABRIKANT, JORDAN S
Provider ID: 262275
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: 20A13142
NPI: 1649585753
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

GERSTENFELD, ERIC S
Provider ID: 26531
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: G70325
NPI: 1114979754
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Corona Regional Med Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

GRAY, JAYLA B
Provider ID: 279378
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COMMUNITY CARE IPA LLC
4765 CARMEL MOUNTAIN RD
STE 201
SAN DIEGO, CA 92130-6657
Phone: (858) 369-7546
Fax: (760) 738-7616
After Hours Phone: (858) 369-7546
Provider Gender: Female
License number: A169832
NPI: 1053706911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HAMMAN, MICHAEL S

Provider ID: 115453
Board Certified Specialty: Yes
WEST DERMATOLOGY AND
SURG MED GRP
9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119
Phone: (858) 454-4300
Fax:
After Hours Phone: (858) 454-4300
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HAMMAN, MICHAEL S , MD

Provider ID: 241043
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HAMMAN, MICHAEL S , MD

Provider ID: 241044
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350

SAN DIEGO, CA 92121-2150
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858) 454-4300
Provider Gender: Male
License number: A97551
NPI: 1538346911
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEMPERLY, STEPHEN E

Provider ID: 115398
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: 20A14658
NPI: 1013277045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEMPERLY, STEPHEN E

Provider ID: 243726
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: 20A14658
NPI: 1013277045
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HIGHTOWER, GEORGE K

Provider ID: 245756
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax:
After Hours Phone: (858) 966-6795
Provider Gender: Male
License number: A156244
NPI: 1881014652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HIGHTOWER, GEORGE K

Provider ID: 285643
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A156244
NPI: 1881014652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

JIANG, SHANG I

Provider ID: 83638
Board Certified Specialty: No
UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN STE 350
 SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322
Fax: (858) 657-1291
After Hours Phone: (858) 657-8322
Provider Gender: Male
License number: A87333
NPI: 1801835996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KANNAN, SWATI V

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D. Directorio de proveedores de atención especializada

Provider ID: 286287
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A137129
NPI: 1508155227
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Santa Monica Ucla Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KASSAB, GHADA K , MD
Provider ID: 245638
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3737 MORAGA AVE STE A206
SAN DIEGO, CA 92117-5493
Phone: (858) 273-2726
Fax: (858) 273-2725
After Hours Phone: (858) 273-2726
Provider Gender: Female
License number: A114457
NPI: 1023278504

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KAUNITZ, GENEVIEVE J
Provider ID: 285011
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A172778
NPI: 1053734905
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
KOZMA, BONITA D
Provider ID: 269301
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A137074
NPI: 1659654598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Providence Saint Johns Health Center, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEVIN, JACQUELINE M
Provider ID: 102457
Board Certified Specialty: No
WEST DERMATOLOGY AND SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619) 298-9809
 Provider Gender: Female
 License number: 20A12190
 NPI: 1164653093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LEVIN, JACQUELINE M

Provider ID: 242685
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
 Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619) 298-9809
 Provider Gender: Female
 License number: 20A12190
 NPI: 1164653093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NAHM, WALTER K , MD

Provider ID: 69317
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 7695 CARDINAL CT STE 200
 SAN DIEGO, CA 92123-3357
 Phone: (858) 278-8835
 Fax: (858) 386-4776
 After Hours Phone: (858) 278-8835
 Provider Gender: Male
 License number: A78569
 NPI: 1467447284
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean, Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

ORME, CHARISSE

Provider ID: 110331
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
 STE 350
 SAN DIEGO, CA 92122-1010
 Phone: (858) 657-8322
 Fax:
 After Hours Phone: (858) 657-8322
 Provider Gender: Female
 License number: A141036
 NPI: 1861767097
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ORTIZ, ARISA E

Provider ID: 84317
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 350
 SAN DIEGO, CA 92122-1010
 Phone: (858) 657-8322
 Fax:
 After Hours Phone: (858) 657-8322
 Provider Gender: Female
 License number: A101163
 NPI: 1659556165
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

REED, KELLY L

Provider ID: 242598
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
 Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619) 298-9809
 Provider Gender: Female
 License number: 20A15550
 NPI: 1053666370
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REED, KELLY L

Provider ID: 242599
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9339 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2150

Phone: (858) 454-4300
 Fax: (858) 484-5088
 After Hours Phone: (858) 454-4300
 Provider Gender: Female
 License number: 20A15550
 NPI: 1053666370
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SCHAIRER, DAVID O

Provider ID: 242313
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Male
 License number: A148597
 NPI: 1619311164
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SCHAIRER, DAVID O

Provider ID: 264683
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Male
 License number: A148597
 NPI: 1619311164
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital Of Orange County
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SCHNEIDER, JEREMY A

Provider ID: 110359

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322

Fax:
After Hours Phone: (858)
657-8322

Provider Gender: Male
License number: A124232
NPI: 1265762520

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SHAHAN, FRED F , MD

Provider ID: 65605
Board Certified Specialty: No
SAN DIEGO DERMATOLOGY
AND COSMETIC SURGERY
6367 ALVARADO CT STE 107
SAN DIEGO, CA 92120-4914
Phone: (619) 287-1882

Fax: (619) 287-4121
After Hours Phone: (619)
287-1882

Provider Gender: Male
License number: G83901
NPI: 1811913221

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Alvarado
Hospital Llc, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SHIELL, RONALD D , MD

Provider ID: 242596
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 289-9809

Fax: (619) 289-9823
After Hours Phone: (619)
289-9809

Provider Gender: Male
License number: G70359
NPI: 1285687384

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SHIELL, RONALD D

Provider ID: 41094
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 289-9809

Fax: (619) 289-9823
After Hours Phone: (619)
289-9809

Provider Gender: Male
License number: G70359
NPI: 1285687384

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

SHI, VERONICA J

Provider ID: 271713
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (800) 926-8273

Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
License number: A152990

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

NPI: 1366897464
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SHI, VERONICA J
 Provider ID: 286335
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A152990
 NPI: 1366897464
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Ucsd Medical Group

SIMZAR, SOHEIL, MD
 Provider ID: 242621
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
 Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619)
 298-9809
 Provider Gender: Male
 License number: A97769
 NPI: 1780881797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Los Angeles
 County Harbor UCLA Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SIMZAR, SOHEIL
 Provider ID: 98869
 Board Certified Specialty: No
 WEST DERMATOLOGY AND
 SURG MED GRP
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619)
 298-9809
 Provider Gender: Male
 License number: A97769
 NPI: 1780881797
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Los Angeles
 County Harbor UCLA Medical
 Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

SINGH, GAURAV
 Provider ID: 272612
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 STE 350
 SAN DIEGO, CA 92122-1010
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A168460
 NPI: 1184073801
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SOHN, GRACE K

Provider ID: 218330

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN
STE 350

SAN DIEGO, CA 92122-1010

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A144607

NPI: 1023405727

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency: No

Hospital Affiliation: John Muir
Medical Center Concord

Campus, John Muir Medical

Center Walnut Creek Campus

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SPRAGUE, JESSICA M

Provider ID: 127460

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

8010 FROST ST STE 602

SAN DIEGO, CA 92123-4204

Phone: (858) 966-6795

Fax:

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A134345

NPI: 1437594884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SPRAGUE, JESSICA M

Provider ID: 242318

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232

Phone: (858) 966-6795

Fax:

After Hours Phone: (858)

966-6795

Provider Gender: Female

License number: A134345

NPI: 1437594884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

STEIN, ALEXANDER D , MD

Provider ID: 268621

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

6280 JACKSON DR STE 8

SAN DIEGO, CA 92119-3436

Phone: (619) 303-3062

Fax: (760) 687-2825

After Hours Phone: (619)
303-3062

Provider Gender: Male

License number: A106295

NPI: 1760431654

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, Romanian

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SUN, BRYAN K

Provider ID: 109550
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 350
SAN DIEGO, CA 92122-1010
Phone: (858) 657-8322
Fax:
After Hours Phone: (858)
657-8322
Provider Gender: Male
License number: A109152
NPI: 1275787673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Stanford
Health Care, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TOMPKINS, STACY D

Provider ID: 115608
Board Certified Specialty: No
WEST DERMATOLOGY AND
SURG MED GRP
9339 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2119

Phone: (858) 454-4300
Fax:
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A52958
NPI: 1255418265
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website: westdermatology.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOMPKINS, STACY D , MD

Provider ID: 246364
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2111
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858)
454-4300
Provider Gender: Female
License number: A52958
NPI: 1255418265
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOM, WYNNIS L

Provider ID: 242311
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858)
966-6795
Provider Gender: Female
License number: A99290
NPI: 1922215045
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin, Spanish,
Yue Chinese
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network

TOM, WYNNIS L

Provider ID: 64659

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax: (858) 966-7479

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A99290

NPI: 1922215045

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish,

Yue Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San

Diego, Sharp Memorial Hospital,

Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TOM, WYNNIS L

Provider ID: 84925

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN

STE 230

SAN DIEGO, CA 92122-1010

Phone: (858) 657-7726

Fax:

After Hours Phone: (858)

657-7726

Provider Gender: Female

License number: A99290

NPI: 1922215045

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin, Spanish,

Yue Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San

Diego, Sharp Memorial Hospital,

Childrens Hosp And Resrch Ctr

At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

TSE, YARDY

Provider ID: 280330

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4765 CARMEL MOUNTAIN RD

STE 201

SAN DIEGO, CA 92130-6657

Phone: (858) 369-7546

Fax: (858) 369-7547

After Hours Phone: (858)

369-7546

Provider Gender: Female

License number: G82156

NPI: 1881608321

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital Chula Vista,

Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ZALESKI LARSEN, LISA A

Provider ID: 109712

Board Certified Specialty: No

WEST DERMATOLOGY AND

SURG MED GRP

4060 4TH AVE STE 415

SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A13774

NPI: 1336296912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website: westdermatology.com

Email:

Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

ZALESKI LARSEN, LISA A , MD

Provider ID: 242549

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

4060 4TH AVE STE 415

SAN DIEGO, CA 92103-2121

Phone: (619) 298-9809

Fax: (619) 298-9823

After Hours Phone: (619)

298-9809

Provider Gender: Female

License number: 20A13774

NPI: 1336296912

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 214806

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

11752 EL CAMINO REAL # 2100

SAN DIEGO, CA 92130-2050

Phone: (858) 793-9591

Fax:

After Hours Phone: (858)

793-9591

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 246932

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

DEVELOPMENTAL BEHAVIORAL PEDIATRICS

GIST, LAUREN

Provider ID: 214805

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 360

SAN DIEGO, CA 92123-2776

Phone: (858) 246-0794

Fax:

After Hours Phone: (858)

246-0794

Provider Gender: Female

License number: A81381

NPI: 1023105335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton

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D. Directorio de proveedores de atención especializada

GIST, LAUREN

Provider ID: 246933
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 11752 EL CAMINO REAL # 100
 SAN DIEGO, CA 92130-2050
Phone: (858) 793-9591
Fax: (858) 793-1153
After Hours Phone: (858) 793-9591
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GIST, LAUREN

Provider ID: 246934
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3665 KEARNY VILLA RD # 410
 SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990
Fax: (858) 966-7508
After Hours Phone: (858) 966-5990
Provider Gender: Female
License number: A81381
NPI: 1023105335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

RHODUS, CECILIA M

Provider ID: 284951
Board Certified Specialty: No
UCSD MEDICAL GROUP
 7910 FROST ST STE 230
 SAN DIEGO, CA 92123-2776
Phone: (858) 246-0053
Fax: (858) 496-9257
After Hours Phone: (858) 246-0053
Provider Gender: Female
License number: A137260
NPI: 1699161059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Northern Inyo Hosp, Rady Childrens Hospital

San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

EMERGENCY MEDICINE

AMANN, CHRISTOPHER J

Provider ID: 270913
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C132360
NPI: 1134326895
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

BARRY, JEFFREY R

Provider ID: 271129
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271130
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARRY, JEFFREY R

Provider ID: 271132
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A149215
NPI: 1801207006
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY

Provider ID: 270333
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143164
NPI: 1801206354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY

Provider ID: 270334
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A143164

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1801206354
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Ucsd La Jolla John Sally
 Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BELLINGHAUSEN, AMY
 Provider ID: 270336
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A143164
 NPI: 1801206354
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital,
 Ucsd La Jolla John Sally
 Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BELLOMO, THOMAS N
 Provider ID: 205601
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105-1690
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619)
 280-2905
 Provider Gender: Male
 License number: G69193
 NPI: 1700926698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/25
 American Sign Language (ASL):
 No
 Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

CHOW, BYRON C
 Provider ID: 206094
 Board Certified Specialty: No

RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Male
 License number: A78116
 NPI: 1619907607
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

CHOW, BYRON C
 Provider ID: 206095
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105-1690
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619)
 280-2905
 Provider Gender: Male
 License number: A78116
 NPI: 1619907607
 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

DEVERA, GEMMIE S

Provider ID: 288572
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: A161466
NPI: 1366622078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
 Network

KANTHARIA, TINA H

Provider ID: 206412
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 402
 SAN DIEGO, CA 92123-4228
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858)
 309-7701
Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KEARNEY, LAUREN K

Provider ID: 206219
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: G83666
NPI: 1740296268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Palomar Health Downtown
 Campus, Palomar Medical
 Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KEARNEY, LAUREN K

Provider ID: 206221
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
 280-2905
Provider Gender: Female
License number: G83666
NPI: 1740296268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Palomar Health Downtown
Campus, Palomar Medical
Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LI, JINGHONG

Provider ID: 255939
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)
657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
LOVEJOY, AMY E
Provider ID: 206107
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905
Provider Gender: Female
License number: A75176
NPI: 1790856557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MINKA, GENEVIEVE M

Provider ID: 205334
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
966-8800
Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MINKA, GENEVIEVE M

Provider ID: 205336
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619)
280-2905
Provider Gender: Female
License number: A77841
NPI: 1689646689
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MISHRA-OCCHINO, SEEMA S

Provider ID: 205404
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-1700
 Fax: (858) 966-7433
 After Hours Phone: (858)
 576-1700
 Provider Gender: Female
 License number: A100307
 NPI: 1689612830
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NGUYEN, MARGARET B

Provider ID: 270705
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 License number: A131847
 NPI: 1942485248
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

PADDOCK, DIANA L

Provider ID: 267967
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: PA52175
 NPI: 1447657804

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

PARIKH, PAYAL

Provider ID: 205870
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 License number: 20A10898
 NPI: 1871757989
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Gujarati, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Kaiser Foundation Hospital San
 Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PARIKH, PAYAL

Provider ID: 205871

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

License number: 20A10898

NPI: 1871757989

Provider English Spoken: Yes

Provider Language(s) Spoken: Gujarati, Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Kaiser Foundation Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PARKER, SHERINE B

Provider ID: 205784

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Female

License number: G81658

NPI: 1477626513

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Glendale Adventist Med Ctr, Glendale Memorial Hosp And Health Ctr, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Valley Childrens Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RILEY-HAGAN, MARGARET

Provider ID: 205988

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Female

License number: A49609

NPI: 1548352388

Provider English Spoken: Yes

Provider Language(s) Spoken: French, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RILEY-HAGAN, MARGARET

Provider ID: 205989

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

License number: A49609

NPI: 1548352388

Provider English Spoken: Yes

Provider Language(s) Spoken: French, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

ROSE, OLGA D
 Provider ID: 205952
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A143536
 NPI: 1740560044
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

Network
ROSE, OLGA D
 Provider ID: 205954
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619) 280-2905
 Provider Gender: Female
 License number: A143536
 NPI: 1740560044
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SIEW, RUTH
 Provider ID: 244692
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 966-8457
 After Hours Phone: (858) 966-5846
 Provider Gender: Female
 License number: A132946
 NPI: 1255674479
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

VAIDYA, KAMALA
 Provider ID: 205809
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A124814
 NPI: 1083840920
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ENDOCRINOLOGY

METABOLISM DIABETES

BOEDER, SCHAFFER C

Provider ID: 117049

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6303

Fax:

After Hours Phone: (619)

543-6303

Provider Gender: Male

License number: A129134

NPI: 1477808285

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BOEDER, SCHAFFER C

Provider ID: 255611

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A129134

NPI: 1477808285

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHUNG, JOYCE

Provider ID: 64551

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST # 1A

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6303

Fax:

After Hours Phone: (619)

543-6303

Provider Gender: Female

License number: A50122

NPI: 1477561504

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Mandarin

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHU, NEELIMA V

Provider ID: 64550

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST # 1A

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6303

Fax:

After Hours Phone: (619)

543-6303

Provider Gender: Female

License number: A65536

NPI: 1154407443

Provider English Spoken: Yes

Provider Language(s) Spoken:

Telugu

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital Encinitas,

Ucsd Medical Ctr, Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

DEMETERCO BERGGREN, CARLA

Provider ID: 121812

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: A98629

NPI: 1619130655

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

EKANAYAKE, PREETHIKA S

Provider ID: 284812

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A126503

NPI: 1083922462

Provider English Spoken: Yes

Provider Language(s) Spoken:

Sinhala, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EKANAYAKE, PREETHIKA S

Provider ID: 284813

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A126503

NPI: 1083922462

Provider English Spoken: Yes

Provider Language(s) Spoken:

Sinhala, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

FEIGENBAUM, ANNETTE S

Provider ID: 104983

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Female

License number: C54803

NPI: 1902187859

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

GOTTESMAN BOWEN, BETHANY L

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 285961
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: A156739
NPI: 1164849899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUERIN, CHRIS K
Provider ID: 284646
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G47081
NPI: 1275648875
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARRIS, SAMANTHA R
Provider ID: 122893
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A120043
NPI: 1720305436
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

Medical Group(s): Logan Heights Family Health Center
IPA:

JUANG, PATRICIA S
Provider ID: 255605
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (858) 657-7298
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JUANG, PATRICIA S
Provider ID: 83642
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (858) 657-1636
Fax: (858) 657-7298
After Hours Phone: (858) 657-1636

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A110217
NPI: 1265695795
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KIM, JANE J

Provider ID: 52051
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax:
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: C51620
NPI: 1235200098
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Medical Ctr At Ucsf
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KULASA, KRISTEN M

Provider ID: 255622
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (619) 543-6500
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A96293
NPI: 1932324175

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KULASA, KRISTEN M

Provider ID: 64591
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST # 1A
 SAN DIEGO, CA 92103-2030

Phone: (619) 543-6303
Fax:
After Hours Phone: (619) 543-6303
Provider Gender: Female
License number: A96293
NPI: 1932324175
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEVINE, MATTHEW J

Provider ID: 64600
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 764-3360
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: A77126
NPI: 1801994231
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MARINKOVIC, MAJA

Provider ID: 52053

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858) 966-4003

Provider Gender: Female

License number: A95251

NPI: 1053469767

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARX, CHRISTOPHER W

Provider ID: 25723

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Provider Gender: Male

License number: G58195

NPI: 1811958929

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
Family Health Center

IPA:

MCCALLUM, JAMES D

Provider ID: 25724

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Provider Gender: Male

License number: A55708

NPI: 1609838994

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
Family Health Center

IPA:

MCCALLUM, JAMES D

Provider ID: 64610

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619) 543-6248

Provider Gender: Male

License number: A55708

NPI: 1609838994

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

☯ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NAGELBERG, JODI B

Provider ID: 287779
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN
 SAN DIEGO, CA 92122-1013
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A146838
 NPI: 1720474141
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NAGELBERG, JODI B

Provider ID: 287780
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A146838
 NPI: 1720474141
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NAGELBERG, JODI B

Provider ID: 287781
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A146838
 NPI: 1720474141
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NAGELBERG, JODI B

Provider ID: 287782
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9909 MIRA MESA BLVD STE
 200
 SAN DIEGO, CA 92131-1061
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A146838
 NPI: 1720474141
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NYHAN, WILLIAM L

Provider ID: 205654
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 4
 NORTH
 SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5840
 Fax: (858) 966-7942
 After Hours Phone: (858) 966-5840
 Provider Gender: Male
 License number: C30911
 NPI: 1710041462
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PHILIS-TSIMIKAS, ATHENA

Provider ID: 109606
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Provider Gender: Female
 License number: A50477
 NPI: 1922105964
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Greek
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps

Memorial Hospital Encinitas, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Logan Heights Family Health Center
 IPA:

RIVERA-VEGA, MICHELLE Y

Provider ID: 259111
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-4032
 Fax: (858) 966-6227
 After Hours Phone: (858) 966-4032
 Provider Gender: Female
 License number: C167414
 NPI: 1992992432
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (858) 657-7298
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A108282
 NPI: 1518163799
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

TANTISIRA, LALITA K

Provider ID: 286323
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR
 STE 2110
 SAN DIEGO, CA 92122-1396
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C170095
 NPI: 1508874298

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Thai
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VARGAS TRUJILLO, MARCELA

Provider ID: 102679
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A139213
NPI: 1952534091
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network
YU, JOSEPH J
Provider ID: 64668
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax: (619) 543-7352
After Hours Phone: (619) 543-6303
Provider Gender: Male
License number: A56057
NPI: 1669464103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT B , MD
Provider ID: 271539
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC

9878 CARMEL MOUNTAIN RD
 STE B
 SAN DIEGO, CA 92129-2893
Phone: (858) 312-1440
Fax: (858) 484-3474
After Hours Phone: (858) 312-1440
Provider Gender: Male
License number: G129295
NPI: 1104845536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FAMILY PRACTICE SPORTS MEDICINE

ACHAR, SURAJ A
Provider ID: 255632
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: G80093
NPI: 1235167321
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KAUFMAN, ELIZABETH A

Provider ID: 285905

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: A135037

NPI: 1942644679

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SPRING, JASON E

Provider ID: 271551

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD
 SAN DIEGO, CA 92127-3445

Phone: (858) 924-1900

Fax: (858) 924-1949

After Hours Phone: (858)

924-1900

Provider Gender: Male

License number: 20A9497

NPI: 1114011459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

FAMILY PRACTICE

ACHAR, SURAJ A

Provider ID: 65095

Board Certified Specialty: No
UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 200
 SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G80093

NPI: 1235167321

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ARRIETA, NOEMI J

Provider ID: 109765

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: 20A11153

NPI: 1912223496

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>♿ Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i>	IHP ST VINCENT DE PAUL VILLAGE 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 <i>Phone:</i> (619) 233-8500 <i>Fax:</i> <i>After Hours Phone:</i> (619) 233-8500 <i>Provider Gender:</i> Female <i>License number:</i> C53121 <i>NPI:</i> 1952390437 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-F 8AM-5:30PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> St Vincent De Paul Village Family Health Center <i>IPA:</i>	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-W, F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-Beach Area <i>IPA:</i>
BOWER, KIMBERLY A <i>Provider ID:</i> 80008 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-8022 <i>Fax:</i> (858) 966-8457 <i>After Hours Phone:</i> (858) 966-8022 <i>Provider Gender:</i> Female <i>License number:</i> A83280 <i>NPI:</i> 1114005741 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	BRODSKY, MARK E <i>Provider ID:</i> 109475 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-BEACH AREA 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Provider Gender:</i> Male <i>License number:</i> C53623 <i>NPI:</i> 1346337904	BROWNELL, KRISTIN J <i>Provider ID:</i> 65875 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> (619) 795-2756 <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Female <i>License number:</i> A80154 <i>NPI:</i> 1134232259 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org
BRADY, PATRICIA H <i>Provider ID:</i> 118664 <i>Board Certified Specialty:</i> No		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s): City Heights
 Family Health Centers Inc
IPA:

BROWN, BRANDON S

Provider ID: 127602
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Provider Gender: Male
License number: A148499
NPI: 1013399559
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
 Family Health Center
IPA:

BUCKHOLZ, GARY T

Provider ID: 83248
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax: (858) 822-6227
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: A82836
NPI: 1174601702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CARSON, COREY M

Provider ID: 109587
Board Certified Specialty: No
 FAMILY HLTH CTR SD
 HILLCREST
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619)
 515-2545
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
 ☞ *Accessibility:*
Hours: M-TH 8AM-9PM, F
 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
 Sd Hillcrest
IPA:

CARSON, COREY M

Provider ID: 110217
Board Certified Specialty: No
 CITY HEIGHTS FAMILY
 HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
 515-2400
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
 Family Health Centers Inc
IPA:

CARSON, COREY M

Provider ID: 110221
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: A136616
NPI: 1245599778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

CHENG, TERRI L

Provider ID: 269914
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2017 1ST AVE STE 100
SAN DIEGO, CA 92101-9001
Phone: (619) 881-4516
Fax:
After Hours Phone: (619)
881-4516
Provider Gender: Female
License number: A151346
NPI: 1942644976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHEN, ALICE I

Provider ID: 207163
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHEN, ALICE I

Provider ID: 207164
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHEN, ALICE I

Provider ID: 207167
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 20A16077
NPI: 1265810337
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CORMAN, DANIEL M
Provider ID: 114951
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights

Family Health Centers Inc
IPA:
CORMAN, DANIEL M
Provider ID: 128274
Board Certified Specialty: No
 FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Male
License number: 20A13060
NPI: 1629339593
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Beach Area
IPA:

COULSON, LAURA E
Provider ID: 108550
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: A76301
NPI: 1447308424
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

EDMONDS, KYLE P
Provider ID: 83397
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 822-6227
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A121683
NPI: 1003044728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GREEN, BRENDA

Provider ID: 109906
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Female
 License number: A134406
 NPI: 1508125410
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights Family Health Centers Inc
 IPA:

GRIFFITHS, KENNETH J

Provider ID: 106937
 Board Certified Specialty: No

FAMILY HLTH CTR SD
 HILLCREST
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2545
 Fax:
 After Hours Phone: (619) 515-2545
 Provider Gender: Male
 License number: C52451
 NPI: 1760563068
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Hlth Ctr Sd Hillcrest
 IPA:

HALBEISEN, ANNA M

Provider ID: 128973
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 200
 SAN DIEGO, CA 92121-2113
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: 20A12902
 NPI: 1801044862
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish

Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 128974
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9909 MIRA MESA BLVD STE 200
 SAN DIEGO, CA 92131-1061
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: 20A12902
 NPI: 1801044862
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201238

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A12902

NPI: 1801044862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201239

Board Certified Specialty: No

UCSD MEDICAL GROUP

9909 MIRA MESA BLVD STE
200

SAN DIEGO, CA 92131-1061

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A12902

NPI: 1801044862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201240

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A12902

NPI: 1801044862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HALBEISEN, ANNA M

Provider ID: 201241

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR # 1

SAN DIEGO, CA 92121-3018

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A12902

NPI: 1801044862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

HAMILTON, LISA MARIE S

Provider ID: 110638

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 515-2560
 Fax:
 After Hours Phone: (619) 515-2560
 Provider Gender: Female
 License number: 20A14772
 NPI: 1235576059
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
 IPA:

HAMILTON, LISA MARIE S

Provider ID: 110642
 Board Certified Specialty: No
 FAMILY HEALTH CTR SAN DIEGO-OAK PARK
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105-5429
 Phone: (619) 515-2454
 Fax:
 After Hours Phone: (619) 515-2454
 Provider Gender: Female
 License number: 20A14772
 NPI: 1235576059
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility:
 Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Family Health Ctr San Diego-Oak Park
 IPA:

KAUFHOLD, ANNE D

Provider ID: 37791
 Board Certified Specialty: No
 COMPREHENSIVE HEALTH CENTER METRO
 3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113-1432
 Phone: (619) 662-4100
 Fax: (619) 858-1003
 After Hours Phone: (619) 662-4100
 Provider Gender: Female
 License number: A88893
 NPI: 1164508073
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website: www.ihpsocal.org
 Email:
 Medical Group(s): San Ysidro Health Chc - Ocean View
 IPA:

KAUFMAN, JENNIFER CHILYN

L
 Provider ID: 120073
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Female
 License number: G149974
 NPI: 1407818768
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights Family Health Centers Inc
 IPA:

KAUFMAN, JENNIFER CHILYN

L
 Provider ID: 120074
 Board Certified Specialty: No
 FAMILY HEALTH CTR IBARRA
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2426
 Fax:
 After Hours Phone: (619) 515-2426
 Provider Gender: Female
 License number: G149974

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1407818768 Provider English Spoken: Yes Provider Language(s) Spoken: Mandarin Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No	♿ Accessibility: P, EB, IB, E, R, T, ME Hours: M-SA 9AM-5PM Website: www.fhcscd.org Email: Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc IPA:	SAN DIEGO, CA 92103-2108 Phone: (619) 471-9260 Fax: After Hours Phone: (619) 471-9260 Provider Gender: Male License number: A104052 NPI: 1124155791 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM Website: www.fhcscd.org Email: Medical Group(s): Family Health Ctr Ibarra IPA:	LAUZON, VANESSA L Provider ID: 110179 Board Certified Specialty: No UCSD MEDICAL GROUP 350 DICKINSON ST SAN DIEGO, CA 92103-1913 Phone: (619) 543-6222 Fax: (619) 543-3738 After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A112525 NPI: 1457507709 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No	♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
KEFLEZIGHI, BAHGHI R Provider ID: 80429 Board Certified Specialty: No DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2560 Fax: (619) 263-2499 After Hours Phone: (619) 515-2560 Provider Gender: Female License number: A100391 NPI: 1124210844 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No	♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	LINDEMAN, KURTIS P Provider ID: 78875 Board Certified Specialty: No IHP ST VINCENT DE PAUL VILLAGE 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638 Phone: (619) 233-8500 Fax: After Hours Phone: (619) 233-8500 Provider Gender: Male License number: A104052 NPI: 1124155791 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla
LINDEMAN, KURTIS P Provider ID: 64347 Board Certified Specialty: No UCSD MEDICAL GROUP 330 LEWIS ST # 400		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8AM-5:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s): St Vincent De
Paul Village Family Health
Center
IPA:

LU, JULIE P

Provider ID: 127485
Board Certified Specialty: No
FAMILY HEALTH CTR SAN
DIEGO-OAK PARK
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: (619) 515-2454
Fax:
After Hours Phone: (619)
515-2454
Provider Gender: Female
License number: 20A14804
NPI: 1619210614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Health

Ctr San Diego-Oak Park
IPA:
LYNCH, SHAUNA M
Provider ID: 269894
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1075 CAMINO DEL RIO S
SAN DIEGO, CA 92108-3538
Phone: (805) 739-8450
Fax:
After Hours Phone: (805)
739-8450
Provider Gender: Female
License number: 20A11056
NPI: 1356551220

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NOVOTNY, RICHARD W

Provider ID: 110220
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619)
471-9260
Provider Gender: Male
License number: A143811
NPI: 1588002877
Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NUQUI, JOSIE C

Provider ID: 129962
Board Certified Specialty: No
OPERATION SAMAHAN - MIRA
MESA
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
Phone: (844) 200-2426
Fax:
After Hours Phone: (844)
200-2426
Provider Gender: Female
License number: A71544
NPI: 1184773673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
www.operationsamahan.org
Email:
Medical Group(s): Operation

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Samahan - Mira Mesa

IPA:

ROSENBLUM, ELIZABETH

Provider ID: 64380

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 400

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9260

Fax:

After Hours Phone: (619)

471-9260

Provider Gender: Female

License number: C52654

NPI: 1669497939

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SANNIDHI, DEEPA V

Provider ID: 117559

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A136286

NPI: 1083007397

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHAHTAJI, ALAN P

Provider ID: 69095

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE STE 200

SAN DIEGO, CA 92121-2113

Phone: (858) 657-8600

Fax:

After Hours Phone: (858)

657-8600

Provider Gender: Male

License number: 20A11087

NPI: 1972751089

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHAHTAJI, ALAN P

Provider ID: 84780

Board Certified Specialty: No

UCSD MEDICAL GROUP

9909 MIRA MESA BLVD STE

200

SAN DIEGO, CA 92131-1061

Phone: (858) 657-7750

Fax:

After Hours Phone: (858)

657-7750

Provider Gender: Male

License number: 20A11087

NPI: 1972751089

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SMOOT, CHARLES B

Provider ID: 39265

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A97036
NPI: 1245490358
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

TAYLOR, KENNETH S

Provider ID: 65106
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 200
 SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A55037
NPI: 1265458269
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

THOMAS, ZACHARY S

Provider ID: 123029
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Male
License number: A145023
NPI: 1326453119
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

TRAN, UYEN THAO P

Provider ID: 25643
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax: (619) 795-2756
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

TRAN, UYEN THAO P

Provider ID: 65771
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: A76709
NPI: 1891720355
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

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D. Directorio de proveedores de atención especializada

Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

YEUNG, HEIDI N

Provider ID: 84253

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A103222

NPI: 1316125198

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY S

Provider ID: 256955

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A63540

NPI: 1750339446

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LUKACZ, EMILY S

Provider ID: 256956

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 360

SAN DIEGO, CA 92121-3020

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A63540

NPI: 1750339446

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GASTROENTEROLOGY

AJMERA, VEERAL H

Provider ID: 116559

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A124545

NPI: 1932429842

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA:

ANAND, GOBIND S
Provider ID: 272837
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2347
Fax: (858) 657-7259
After Hours Phone: (619) 543-2347
Provider Gender: Male
License number: A120739
NPI: 1861626814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAUMAN, LAURA E
Provider ID: 260041
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female

License number: A157981
NPI: 1255697850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BORTNIKER, ETHAN I
Provider ID: 238774
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155188
NPI: 1396905576
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, LILLIAN J
Provider ID: 206042
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A90646
NPI: 1831350453
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

COPUR DAHI, NEDRET
Provider ID: 63862
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222 Fax: (619) 543-7731 After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A99701 NPI: 1932290145 Provider English Spoken: Yes Provider Language(s) Spoken: Turkish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd	9AM-5PM Website: www.3dcinc.com Email: Medical Group(s): IPA: Imperial Health Holdings Medical Group-Sd
CUBAS, IVAN P Provider ID: 262292 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 292 EUCLID AVE STE 115 SAN DIEGO, CA 92114-3629 Phone: (619) 266-3332 Fax: (619) 266-6000 After Hours Phone: (619) 266-3332 Provider Gender: Male License number: C55825 NPI: 1447464912 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Valley Hospital, Scripps Mercy Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 9AM-5PM, SA	CUBAS, IVAN P Provider ID: 88139 Board Certified Specialty: No DIGESTIVE DISEASE ASSOCS INC 292 EUCLID AVE STE 115 SAN DIEGO, CA 92114-3629 Phone: (619) 266-3332 Fax: (619) 266-6000 After Hours Phone: (619) 266-3332 Provider Gender: Male License number: C55825 NPI: 1447464912 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: No Hospital Affiliation: Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-F 9AM-5PM, SA	DAVE, SHRAVAN S Provider ID: 270450 Board Certified Specialty: No UCSD MEDICAL GROUP 4510 EXECUTIVE DR # 7 SAN DIEGO, CA 92121-3021 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A139385 NPI: 1588081814 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
	DESTA, TADDESE T Provider ID: 26477 Board Certified Specialty: No DIGESTIVE DISEASE ASSOCS INC 292 EUCLID AVE STE 115 SAN DIEGO, CA 92114-3629	

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D. Directorio de proveedores de atención especializada

Phone: (619) 266-3332
Fax: (619) 266-6006
After Hours Phone: (619) 266-3332
Provider Gender: Male
License number: A49164
NPI: 1346326246
Provider English Spoken: Yes
Provider Language(s) Spoken: Amharic, Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.3dcinc.com
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

DESTA, TADDESE T

Provider ID: 26477
Board Certified Specialty: No
 DIGESTIVE DISEASE ASSOCS INC
 292 EUCLID AVE STE 115
 SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619) 266-3332
Provider Gender: Male
License number: A49164
NPI: 1346326246
Provider English Spoken: Yes

Provider Language(s) Spoken: Amharic, Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

DEVER, JOHN B

Provider ID: 110435
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A114858
NPI: 1093918724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FELDSTEIN, ARIEL E

Provider ID: 79848
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858) 966-4003
Provider Gender: Male
License number: C54991
NPI: 1174587281
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GARCIA, MARY ABIGAIL S

Provider ID: 205694
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SOUTH

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A89980
NPI: 1386805877
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HASSANEIN, TAREK I , MD
Provider ID: 269557
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 995 GATEWAY CENTER WAY
 STE 105
 SAN DIEGO, CA 92102-4544
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619) 264-1934
Provider Gender: Male
License number: A54452
NPI: 1801854450
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, German, Spanish, Urdu
Cultural Competency: No

Hospital Affiliation: Parkview Community Hospital Medical Center, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr, Saddleback Memorial Med Ctr, Scripps Mercy Hospital Chula Vista, Riverside Community Hosp, Childrens Hospital At Mission, Grossmont Hospital, Alvarado Hospital Llc, Hoag Hospital Irvine
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEMPERLY, AMY V
Provider ID: 244166
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: 20A14741
NPI: 1881960888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HEMPERLY, AMY V
Provider ID: 259013
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003

Provider Gender: Female
License number: 20A14741
NPI: 1881960888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HILDRETH, AMBER N
Provider ID: 280464

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: 20A14177
NPI: 1548521511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HOM, XENIA B
Provider ID: 206024
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: G86642
NPI: 1982775748
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Chinese (Family), Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUANG, JEANNIE S
Provider ID: 205939
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 SOUTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-1700
Provider Gender: Female
License number: A61762
NPI: 1013088871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KALMAZ, DENISE
Provider ID: 63987
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2347
Fax: (619) 543-7731
After Hours Phone: (619) 543-2347
Provider Gender: Female
License number: A87252
NPI: 1275700973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KLAPHEKE, ROBERT W
Provider ID: 283346
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A154916
 NPI: 1891113288
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KONO, YUKO

Provider ID: 64589
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Female
 License number: A111039
 NPI: 1982628665
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KONO, YUKO

Provider ID: 83663
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax: (619) 471-9473
 After Hours Phone: (619) 543-2218
 Provider Gender: Female
 License number: A111039
 NPI: 1982628665
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KONO, YUKO

Provider ID: 83664
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Female
 License number: A111039
 NPI: 1982628665
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KUMAR, SOMA

Provider ID: 205377
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 SOUTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-4003
 Fax: (858) 560-6798
 After Hours Phone: (858) 966-4003
 Provider Gender: Female
 License number: A140223
 NPI: 1356502520
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MENDLER, MICHEL H
Provider ID: 210291
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR FL 2
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No
Hospital Affiliation: Keck Hospital
 Of Usc, Ucsd Medical Ctr, Usc
 Kenneth Norris Jr Cancer
 Hospital, Lac Usc Medical
 Center, Lac Rancho Los Amigos
 National Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
MENDLER, MICHEL H
Provider ID: 210293
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR # 7
 SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Lac Usc Medical Center, Lac
 Rancho Los Amigos National
 Rehab Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group
MENDLER, MICHEL H
Provider ID: 64079
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

MENDLER, MICHEL H
Provider ID: 64079
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax: (909) 558-6415
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: A78316
NPI: 1134232051
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Lac Usc Medical Center, Lac
 Rancho Los Amigos National
 Rehab Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATEL, DEREK R
Provider ID: 64130
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2347
Fax:
After Hours Phone: (619)
 543-2347
Provider Gender: Male
License number: A69111
NPI: 1073538385
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PATTON, HEATHER M

Provider ID: 64627
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 2
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5415
 Fax:
 After Hours Phone: (619) 543-5415
 Provider Gender: Female
 License number: A75284
 NPI: 1396796124
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

POLK, DAVID B

Provider ID: 275449
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Male
 License number: A43654
 NPI: 1427140839
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

REDDY, ANANTHRAM P , MD

Provider ID: 34354
 Board Certified Specialty: Yes
 SUMANA AND ANANTHRAM REDDY MD INC
 6699 ALVARADO RD STE 2301
 SAN DIEGO, CA 92120-5241
 Phone: (619) 229-1005
 Fax: (619) 588-4004
 After Hours Phone: (619) 229-1005
 Provider Gender: Male
 License number: C52423
 NPI: 1124014923
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish

Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, ANANTHRAM P

Provider ID: 34354
 Board Certified Specialty: No
 SUMANA AND ANANTHRAM REDDY MD INC
 6699 ALVARADO RD STE 2301
 SAN DIEGO, CA 92120-5241
 Phone: (619) 299-1005
 Fax: (619) 326-0380
 After Hours Phone: (619) 299-1005
 Provider Gender: Male
 License number: C52423
 NPI: 1124014923
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, ANANTHRAM P

Provider ID: 34354
Board Certified Specialty: Yes
SUMANA AND ANANTHRAM
REDDY MD INC
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120-5241
Phone: (619) 229-1005
Fax: (619) 588-4004
After Hours Phone: (619)
229-1005
Provider Gender: Male
License number: C52423
NPI: 1124014923
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cambodian, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

REDDY, JOSEPH B

Provider ID: 27748
Board Certified Specialty: Yes
ADVANCED ENDOSCOPY
CONSULTANTS INC
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120-5241

Phone: (619) 270-5665
Fax: (619) 588-4004
After Hours Phone: (619)
270-5665
Provider Gender: Male
License number: A46472
NPI: 1245215391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

REDDY, JOSEPH B

Provider ID: 27748
Board Certified Specialty: No
ADVANCED ENDOSCOPY
CONSULTANTS INC
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120-5241
Phone: (619) 588-4074
Fax: (619) 588-4004
After Hours Phone: (619)
588-4074
Provider Gender: Male
License number: A46472
NPI: 1245215391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-W 8AM-5PM, TH,F
8AM-3PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SCHAEFFER, CYNTHIA L

Provider ID: 26694
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS
INC
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629
Phone: (619) 266-3332
Fax: (619) 266-6000
After Hours Phone: (619)
266-3332
Provider Gender: Female
License number: A91771
NPI: 1740352293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

SCHAEFFER, CYNTHIA L

Provider ID: 26694
Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS
INC

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629

Phone: (619) 266-3332

Fax: (619) 266-6000

After Hours Phone: (619)
266-3332

Provider Gender: Female

License number: A91771

NPI: 1740352293

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Memorial Hospital, Scripps
Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.3dcinc.com

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

SHAH, SHAILJA C

Provider ID: 283896

Board Certified Specialty: No

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A125800

NPI: 1073803243

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

THOMAS, CARLTON W

Provider ID: 125014

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629

Phone: (619) 266-3332

Fax: (619) 266-6006

After Hours Phone: (619)
266-3332

Provider Gender: Male

License number: A88112

NPI: 1205881398

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

THOMAS, CARLTON W

Provider ID: 54337

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101-2650

Phone: (619) 266-3332

Fax: (619) 266-6000

After Hours Phone: (619)
266-3332

Provider Gender: Male

License number: A88112

NPI: 1205881398

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

THOMAS, CARLTON W

Provider ID: 66107

Board Certified Specialty: No
DIGESTIVE DISEASE ASSOCS
INC

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114-3629

Phone: (619) 266-3332

Fax:

After Hours Phone: (619)
266-3332

Provider Gender: Male

License number: A88112

NPI: 1205881398

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps Mercy
Hospital Chula Vista, Sharp
Chula Vista Med Ctr, Scripps
Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-F 9AM-5PM, SA
9AM-5PM

Website: www.3dcinc.com

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

WONG, GREGORY K

Provider ID: 279598

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858)

966-4003

Provider Gender: Male

License number: A124939

NPI: 1386977288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens
Hospital Of Orange County,
Pomona Valley Hosp Med Ctr,
Providence St Joseph Hospital,
Fountain Valley Regional Hosp
And Med Ctr, Childrens Hospital
At Mission, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

YANG, EDWARD

Provider ID: 283165

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A154057

NPI: 1437545654

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GENERAL PRACTICE

BORRERO, MARCOS

Provider ID: 125077

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

3490 PALM AVE

SAN DIEGO, CA 92154-1664

Phone: (619) 423-5616

Fax: (619) 423-5686

After Hours Phone: (619)
423-5616

Provider Gender: Male

License number: A38907

NPI: 1952312621

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy

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D. Directorio de proveedores de atención especializada

Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No

♿ Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

GENETICS CLINICAL BIOCHEMICAL

LEVINE, FRED

Provider ID: 206098
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 4
 NORTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5840
 Fax: (858) 966-7942
 After Hours Phone: (858)
 966-5840
 Provider Gender: Male
 License number: G65341
 NPI: 1154493476
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Rady Childrens Health
 Network

GENETICS CLINICAL

JONES, KENNETH L

Provider ID: 276105
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 7910 FROST ST STE 230
 SAN DIEGO, CA 92123-2776
 Phone: (858) 502-1100
 Fax: (858) 505-9931
 After Hours Phone: (858)
 502-1100
 Provider Gender: Male
 License number: G29045
 NPI: 1962550673
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GENETICS MEDICAL

BARSHOP, BRUCE A

Provider ID: 202349
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 212 DICKINSON ST # CTFB213
 SAN DIEGO, CA 92103-2071

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273

Provider Gender: Male
 License number: G58157
 NPI: 1477624237
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego, Ucsd La Jolla John Sally
 Thornton

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BIRD, LYNNE M

Provider ID: 206065
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858)
 966-7484
 Provider Gender: Female
 License number: A45464
 NPI: 1487725230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Sharp

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D. Directorio de proveedores de atención especializada

Mary Birch Hosp For Women
And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BIRD, LYNNE M

Provider ID: 257903

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-1700

Fax: (858) 966-4064

After Hours Phone: (858)
966-1700

Provider Gender: Female

License number: A45464

NPI: 1487725230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Sharp
Mary Birch Hosp For Women
And Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: 0/25

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BIRD, LYNNE M

Provider ID: 52305

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Female

License number: A45464

NPI: 1487725230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Sharp
Mary Birch Hosp For Women
And Newborns

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 102437

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED

FNDTN

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Male

License number: F30

NPI: 1598141475

Provider English Spoken: Yes

Provider Language(s) Spoken:
French, Italian, Portuguese,
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

DEL CAMPO CASANELLES, MIGUEL

Provider ID: 206013

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: F30
 NPI: 1598141475
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

JONES, MARILYN C

Provider ID: 202348
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121-3814
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G30850
 NPI: 1295806040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 206268
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858) 966-7484
 Provider Gender: Female
 License number: G30850
 NPI: 1295806040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

JONES, MARILYN C

Provider ID: 243882

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5840
 Fax: (858) 966-8550
 After Hours Phone: (858) 966-5840
 Provider Gender: Female
 License number: G30850
 NPI: 1295806040
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network, Ucsd Medical Group

LEVINE, FRED

Provider ID: 52504
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax:
 After Hours Phone: (858) 966-6789
 Provider Gender: Male
 License number: G65341

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1154493476
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MARDACH, REBECCA

Provider ID: 241946
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-5840
 Fax:
 After Hours Phone: (858)
 966-5840
 Provider Gender: Female
 License number: A45110
 NPI: 1457330607
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald
 Reagan UCLA Med Ctr, Uc Davis
 Medical Ctr, Rady Childrens
 Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MARDACH, REBECCA

Provider ID: 241947
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5840
 Fax:
 After Hours Phone: (858)
 966-5840
 Provider Gender: Female
 License number: A45110
 NPI: 1457330607
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald
 Reagan UCLA Med Ctr, Uc Davis
 Medical Ctr, Rady Childrens
 Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NIEMI, ANNA-KAISA

Provider ID: 127720
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax:
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A104907
 NPI: 1497941397
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NIEMI, ANNA-KAISA

Provider ID: 127721
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
 Phone: (619) 260-7046
 Fax:
 After Hours Phone: (619)
 260-7046
 Provider Gender: Female
 License number: A104907
 NPI: 1497941397
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

WIGBY, KRISTEN M

Provider ID: 206185

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858) 966-7484

Provider Gender: Female

License number: A136240

NPI: 1487920724

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

GYNECOLOGY

WEBER, AKILAH F

Provider ID: 206332

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858) 966-7484

Provider Gender: Female

License number: C56035

NPI: 1760652713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility: P, EB, IB, E, R, T

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619) 583-7002

Provider Gender: Female

License number: HA7100

NPI: 1063558856

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

ANDERSON, ELAINE M , MD

Provider ID: 268691

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9340 CLAIREMONT MESA BLVD STE D

SAN DIEGO, CA 92123-1224

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858) 278-9911

Provider Gender: Female

License number: HA7100

NPI: 1063558856

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE M , MD

Provider ID: 268689

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120-4914

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DANDURAND, JOHN M , MD

Provider ID: 269781

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6367 ALVARADO CT
SAN DIEGO, CA 92120-4904

Phone: (619) 824-3138

Fax: (619) 583-9404

After Hours Phone: (619)
824-3138

Provider Gender: Male

License number: HA2056

NPI: 1497901680

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DAVIS, KELLE L , MD

Provider ID: 268652

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120-4914

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)
583-7002

Provider Gender: Female

License number: HA6083

NPI: 1902853344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

DAVIS, KELLE L , MD

Provider ID: 268653

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

9340 CLAIREMONT MESA
BLVD STE D

SAN DIEGO, CA 92123-1224

Phone: (858) 278-9911

Fax: (858) 565-7324

After Hours Phone: (858)
278-9911

Provider Gender: Female

License number: HA6083

NPI: 1902853344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HEMATOLOGY / ONCOLOGY

ARISTIZABAL, MARIA P

Provider ID: 78395

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax:

After Hours Phone: (858)
966-5811

Provider Gender: Female

License number: A127586

NPI: 1154662583

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

BESSUDO, ALBERTO, MD

Provider ID: 256962

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 649-5100
 Fax: (858) 649-5099
 After Hours Phone: (858) 649-5100
 Provider Gender: Male
 License number: A50309
 NPI: 1003888074
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hebrew, Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Pomerado Hospital, Palomar Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BOTTA, GREGORY P
 Provider ID: 242347
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A140495
 NPI: 1881006955
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DING, HILDA H
 Provider ID: 109323
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5811
 Fax:
 After Hours Phone: (858) 966-5811
 Provider Gender: Female
 License number: A144295
 NPI: 1780813923
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Rady Childrens Health Network

EISENBERG, STEVEN G
 Provider ID: 242455
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
 Phone: (858) 649-5100
 Fax: (858) 649-5099
 After Hours Phone: (858) 649-5100
 Provider Gender: Male
 License number: 20A8293
 NPI: 1831162627
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 Hospital Affiliation: Pomerado Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FLORES, EDNA I
 Provider ID: 115370
 Board Certified Specialty: No
 CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455

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D. Directorio de proveedores de atención especializada

Phone: (858) 649-5100

Fax:

After Hours Phone: (858)
649-5100

Provider Gender: Female

License number: A114373

NPI: 1396994604

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Pioneers

Memorial Hospital, Scripps

Memorial Hospital Encinitas,

Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

FRAKES, LAURIE A

Provider ID: 68216

Board Certified Specialty: No

CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax:

After Hours Phone: (858)

649-5100

Provider Gender: Female

License number: A52663

NPI: 1174595144

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Scripps Memorial

Hospital, Scripps Memorial

Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

GLOUDE, NICHOLAS J

Provider ID: 117121

Board Certified Specialty: No

CHILDRENS HOSP SAN DIEGO
CHADWICK CTR

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax:

After Hours Phone: (858)

966-5811

Provider Gender: Male

License number: A119146

NPI: 1447527833

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GOODMAN, AARON M

Provider ID: 216895

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122-1013

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A130400

NPI: 1851603559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAMON, JOEL M , MD

Provider ID: 241036

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G28164
NPI: 1699721035
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M

Provider ID: 68222
Board Certified Specialty: No
 CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax:
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: G28164
NPI: 1699721035
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No

Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LEE, KAREN K

Provider ID: 284165
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A154276
NPI: 1518352970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

MCKAY, RANA R

Provider ID: 110729
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 822-6100
Fax:
After Hours Phone: (858) 822-6100
Provider Gender: Female
License number: A145444
NPI: 1306013610
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAUL, MEGAN R

Provider ID: 274499
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A141572
NPI: 1427495894

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

VON DRYGALSKI, ANNETTE

Provider ID: 101374
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 201
 SAN DIEGO, CA 92122-1008
Phone: (858) 657-5947
Fax:
After Hours Phone: (858)
 657-5947
Provider Gender: Female
License number: A100681
NPI: 1376607036
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Rady Childrens Hospital San
 Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

VU, PETER

Provider ID: 272716
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A149741
NPI: 1861810830
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ZHOU, JENNY Y

Provider ID: 273188
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE # 310
 SAN DIEGO, CA 92121-2111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A133845

NPI: 1598007924
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEPATOLOGY

BARMAN, PRANAB M

Provider ID: 241953
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 315
 SAN DIEGO, CA 92121-3029
Phone: (800) 826-5273
Fax:
After Hours Phone: (800)
 826-5273
Provider Gender: Male
License number: A162554
NPI: 1023301991
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KUO, ALEXANDER

Provider ID: 64592
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619)
543-5415
Provider Gender: Male
License number: A86787
NPI: 1912032764
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHARPTON, SUZANNE

Provider ID: 245666
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A123642
NPI: 1891084257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHARPTON, SUZANNE

Provider ID: 245668
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR # 7
SAN DIEGO, CA 92121-3021
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A123642
NPI: 1891084257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOSPICE AND PALLIATIVE MEDICINE

BOWER, KIMBERLY A

Provider ID: 260051
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8022
Fax: (858) 966-8457
After Hours Phone: (858)
966-8022
Provider Gender: Female
License number: A83280
NPI: 1114005741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RUBENSIK, TAMARA T

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 125355
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENSIK, TAMARA T

Provider ID: 245573
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUBENSIK, TAMARA T

Provider ID: 276671
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A119245
NPI: 1811200652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHIFF, DEBORAH E

Provider ID: 52321
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: G68457
NPI: 1922179779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Rady
 Childrens Hospital San Diego,
 Scripps Green Hospital,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HOSPITALIST MD/DO

CHILDERS, DIANA J

Provider ID: 275068
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A86157
 NPI: 1033128376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

FIRESTEIN, CATHERINE E
 Provider ID: 275387
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A143013
 NPI: 1427348382
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HAMMOND, CHARLES F
 Provider ID: 278588
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A169655
 NPI: 1033641816
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SCANLON, ASHLEY A
 Provider ID: 287138
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A165174
 NPI: 1932605086
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SHINDO, YURI
 Provider ID: 284743
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A167796
 NPI: 1700271939
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Japanese
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SPILMAN, SAMANTHA L

Provider ID: 272704
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A161231
NPI: 1134651607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INFECTIOUS DISEASE

ARNOLD, JOHN C

Provider ID: 260077
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885)
 966-7785
Provider Gender: Male
License number: A70189
NPI: 1023191053
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ARONOFF SPENCER, ELIAH S

Provider ID: 83195
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-6614
After Hours Phone: (619)
 543-6146
Provider Gender: Male
License number: A104748
NPI: 1770737579
Provider English Spoken: Yes
Provider Language(s) Spoken:

French, Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ASLAM, SAIMA

Provider ID: 64526
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858)
 657-8000
Provider Gender: Female
License number: A112604
NPI: 1477565257
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

BAMFORD, LAURA P

Provider ID: 276546
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6382
Fax: (888) 539-8781
After Hours Phone: (619) 543-6382
Provider Gender: Female
License number: C169020
NPI: 1750435996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BHARTI, AJAY R

Provider ID: 64532
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-7841
After Hours Phone: (619) 543-6146
Provider Gender: Male
License number: A85085
NPI: 1902954910
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLANCHARD, JENNIFER N

Provider ID: 64536
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax: (619) 543-7841
After Hours Phone: (619) 543-3995
Provider Gender: Female
License number: A65285
NPI: 1972545077
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

BLUMENTHAL, JILL S

Provider ID: 122503
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: A117338
NPI: 1336308378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BLUMENTHAL, JILL S

Provider ID: 88097
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 543-3511
After Hours Phone: (619) 543-6146
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: A117338
 NPI: 1336308378
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BURNS, JANE C

Provider ID: 206071
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 246-0157
 Fax: (858) 966-8527
 After Hours Phone: (858) 246-0157
 Provider Gender: Female
 License number: G68119
 NPI: 1619040953
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Italian, Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CACHAY, EDWARD R

Provider ID: 64541
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax: (619) 543-7841
 After Hours Phone: (619) 543-6248
 Provider Gender: Male
 License number: A84561
 NPI: 1336290071
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DAN, JENNIFER M

Provider ID: 110016
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030

Phone: (619) 543-6146
 Fax:
 After Hours Phone: (619) 543-6146
 Provider Gender: Female
 License number: A119193
 NPI: 1225343601
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DEISS, ROBERT G

Provider ID: 258330
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-3995
 Fax:
 After Hours Phone: (619) 543-3995
 Provider Gender: Male
 License number: A111310
 NPI: 1194977652
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FARNAES, LAUGE

Provider ID: 260385
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885) 966-7785
Provider Gender: Male
License number: A124601
NPI: 1881988749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HORTON, LUCY E

Provider ID: 240887
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A137391
NPI: 1427324821
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KATSIVAS, THEODOROS F , MD

Provider ID: 269840
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-3000
Fax:
After Hours Phone: (619) 543-3000
Provider Gender: Male
License number: A78543
NPI: 1679526164
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LATHER, TUYET T

Provider ID: 245064
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619) 543-3995
Provider Gender: Female
License number: 20A9180
NPI: 1467668053
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAW, NANCY

Provider ID: 117545
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: 20A15618
NPI: 1225327349
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LETENDRE, SCOTT L
Provider ID: 64599
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619) 543-3995
Provider Gender: Male
License number: A63591
NPI: 1588696660
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEWINSKI, MARY K
Provider ID: 114987
Board Certified Specialty: No
FAMILY HLTH CTR SD HILLCREST
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Female
License number: A109633
NPI: 1659535094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr Sd Hillcrest
IPA:

LITTLE, SUSAN J
Provider ID: 64601
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax: (619) 298-0177
After Hours Phone: (619) 543-6146
Provider Gender: Female
License number: G70574
NPI: 1033134572
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIU, GEORGE Y
Provider ID: 208185
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2S
SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax:
After Hours Phone: (885) 966-7785
Provider Gender: Male
License number: A70228
NPI: 1699727321
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MARTIN, THOMAS C

Provider ID: 277225
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A155619
NPI: 1093193583
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
MARTIN, THOMAS C
Provider ID: 277226
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A155619
NPI: 1093193583
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MOODLEY, AMARAN

Provider ID: 208558
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885)
966-7785
Provider Gender: Male

License number: A108369
NPI: 1104023670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PROMER, KATHERINE E

Provider ID: 258545
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A131952
NPI: 1306280607
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

RAJAGOPAL, AMUTHA V

Provider ID: 221088
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A135167
NPI: 1124465745
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAMCHANDAR, NANDA

Provider ID: 285942
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
966-7785
Provider Gender: Male
License number: A154225

NPI: 1477998912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RAWLINGS, STEPHEN A

Provider ID: 284363
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146123
NPI: 1861888984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group

RAWLINGS, STEPHEN A

Provider ID: 284364
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A146123
NPI: 1861888984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

REED, SHARON L

Provider ID: 64632
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6146
Fax:
After Hours Phone: (619)
543-6146
Provider Gender: Female
License number: G40122

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1710902044

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RITTER, MICHELE L

Provider ID: 64637

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A112536

NPI: 1225262975

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SAWYER, MARK H

Provider ID: 206240

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-7466

After Hours Phone: (858)

966-7785

Provider Gender: Male

License number: G46156

NPI: 1477624229

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Network

TOVAR PADUA, LEIDY J

Provider ID: 205357

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-7785

Fax: (858) 966-8658

After Hours Phone: (858) 966-7785

Provider Gender: Female

License number: A130894

NPI: 1033491311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles, Long Beach Memorial Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Network

TOVAR PADUA, LEIDY J

Provider ID: 265093

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: A130894

NPI: 1033491311

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Childrens Hosp Of Los Angeles,
Long Beach Memorial Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WAGNER, GABRIEL A

Provider ID: 102090

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-3995

Fax: (619) 543-7841

After Hours Phone: (619)

543-3995

Provider Gender: Male

License number: A108967

NPI: 1992962245

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210825

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A79574

NPI: 1093791014

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta,

Scripps Memorial Hospital, Ucsd

La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BEGOVIC, ADNAN

Provider ID: 276290

Board Certified Specialty: No

UCSD MEDICAL GROUP

555 WASHINGTON ST

SAN DIEGO, CA 92103-2289

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A79574

NPI: 1093791014

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta,

Scripps Memorial Hospital, Ucsd

La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BEGOVIC, ADNAN

Provider ID: 276291

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR # 3-313

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A79574

NPI: 1093791014

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Southwest Healthcare

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D. Directorio de proveedores de atención especializada

System Wildomar, Southwest
Healthcare System Murrieta,
Scripps Memorial Hospital, Ucsd
La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284704
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273
Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
BOROK, ZEA
Provider ID: 284705
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273

Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BOROK, ZEA

Provider ID: 284706
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (800) 926-5273
Fax: (888) 539-8781
After Hours Phone: (800)
926-5273
Provider Gender: Female
License number: A47911
NPI: 1750317251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency: No
Hospital Affiliation: Ronald
Reagan UCLA Med Ctr, Lac Usc
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271466
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

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D. Directorio de proveedores de atención especializada

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271467
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ODISH, MAZEN F

Provider ID: 271469
Board Certified Specialty: No

UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A133179
NPI: 1992141428
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRAN, LINH N

Provider ID: 271939
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A122603
NPI: 1851682728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd

Medical Ctr, Southwest
 Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERNAL MEDICINE GERIATRIC MEDICINE

AGNIHOTRI, PARAG

Provider ID: 247292
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: C52218
NPI: 1447351085
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

BOULAND, DANIEL L

Provider ID: 63814
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G50358
NPI: 1669498630
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Riverside Community Hosp, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUTIERREZ, AIREEN L

Provider ID: 247325
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A77031
NPI: 1306857701
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Ucsd Medical Group

YOURMAN, LINDSEY C

Provider ID: 124823
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A122839
NPI: 1174813943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:

INTERNAL MEDICINE

ABDELMALEK, JOSEPH A

Provider ID: 63765
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A107185
NPI: 1740485531
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ABELES, SHIRA R

Provider ID: 83076
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A103260
NPI: 1720240625

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALASSIL, SALLY

Provider ID: 124640
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A122238
NPI: 1982044483
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights

Family Health Center
IPA:
ALLY, MARYANN T
Provider ID: 116564
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Female
License number: C146011
NPI: 1316104359
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AMIRREZVANI, ALI

Provider ID: 63781
Board Certified Specialty: No
 UCSD DEPARTMENT OF MED
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G88284

NPI: 1861485005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANTONUCCI, STEPHEN A

Provider ID: 113895
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A143234
NPI: 1124331426
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

ARUTYUNOV, BORIS S

Provider ID: 201910

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)

471-9186

Provider Gender: Male

License number: A137892

NPI: 1144562703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Good

Samaritan Hospital, Good

Samaritan Hospital Los Angeles,

Sutter Medical Center

Sacramento, Ucsd La Jolla John

Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

Phone: (619) 543-6222

Fax: (619) 543-8255

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A100515

NPI: 1548208812

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BAJWA, JASWINDER P

Provider ID: 63791

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (619) 543-8255

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A118049

NPI: 1306000922

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Punjabi

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BAZICK, JESSICA G

Provider ID: 63801

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A121356

NPI: 1114155082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BEGOVIC, ADNAN

Provider ID: 63803

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A79574
 NPI: 1093791014
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BEHREND, TERRY L , MD
 Provider ID: 244798
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123-2781
 Phone: (858) 637-4700
 Fax: (858) 637-4701
 After Hours Phone: (858) 637-4700
 Provider Gender: Male
 License number: A75812
 NPI: 1790780484
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: Yes
 Min/Max Age: 18/120
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BELL, JOHN F
 Provider ID: 63805
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax: (619) 543-8255
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A120667
 NPI: 1699978445
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BIRGERSDOTTER GREEN, ULRIKA M
 Provider ID: 64534

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5743
 Fax: (619) 543-2917
 After Hours Phone: (619) 543-5743
 Provider Gender: Female
 License number: A49525
 NPI: 1851349757
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BLUESTEIN, HARRY G
 Provider ID: 64538
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Male
 License number: G20053
 NPI: 1295793024
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BORDIN-WOSK, TALYA S

Provider ID: 273983
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (760) 471-9186
 Fax: (619) 543-8255
 After Hours Phone: (760) 471-9186
 Provider Gender: Female
 License number: A123772
 NPI: 1801184973
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BROWNE, SARA H

Provider ID: 64540
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858) 657-8000
 Provider Gender: Female
 License number: A51877
 NPI: 1275571176
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CAPERNA, JOSEPH C

Provider ID: 63155
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax: (858) 822-5362
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A49951
 NPI: 1720141153
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CARLIN, AARON F

Provider ID: 83255
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619) 471-9186
 Provider Gender: Male
 License number: A115480
 NPI: 1760718035
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHACE, CONSTANCE R

Provider ID: 117244
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)
471-9186

Provider Gender: Female

License number: A129086

NPI: 1154682953

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHANG, JOHN T

Provider ID: 63841

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 822-7652

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A110350

NPI: 1265594527

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CHENG, GEORGE Z

Provider ID: 247639

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A166013

NPI: 1316174568

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHEN, CHUNG-JIAH J

Provider ID: 272667

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A158441

NPI: 1548792377

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHOE, CHARLES H

Provider ID: 64549

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (649) 543-6303

Fax: (619) 543-7352

After Hours Phone: (649)

543-6303

Provider Gender: Male

License number: A77451

NPI: 1891733846

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): 200 W ARBOR DR
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHONGKRAIRATANAKUL, TEP S I R I, MD

Provider ID: 269868
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: C157995
NPI: 1982806329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Thai
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU E I R I, MICHEL B

Provider ID: 113618
Board Certified Specialty: No
UCSD MEDICAL GROUP

Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619)
471-9186
Provider Gender: Male
License number: A117112
NPI: 1780991869
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CLAY, BRIAN J

Provider ID: 63856
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9198
Fax:
After Hours Phone: (619)
471-9198
Provider Gender: Male
License number: A83799
NPI: 1831124635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DAVIS, JASON T , MD

Provider ID: 270967
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7910 FROST ST STE 250
SAN DIEGO, CA 92123-2752
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858)
637-4800
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp
Coronado Hosp And Healthcare
Ctr, Sharp Memorial Hospital,
Kindred Hospital San Diego,
Scripps Mercy Hospital, Vibra
Hospital Of San Diego,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical

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D. Directorio de proveedores de atención especializada

Group-Sd

DAVIS, JASON T , MD

Provider ID: 80404

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

4060 4TH AVE STE 220

SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)

299-2350

Provider Gender: Male

License number: A100799

NPI: 1295911469

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare

Ctr, Sharp Memorial Hospital,

Kindred Hospital San Diego,

Scripps Mercy Hospital, Vibra

Hospital Of San Diego,

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL):
No

♿ *Accessibility:* P, IB, E

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical

Group-Sd

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: 20A15063

NPI: 1417343732

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

EISENBERG, STEVEN G

Provider ID: 68214

Board Certified Specialty: No

CALIFORNIA CANCER

ASSOCS FOR RESEARCH AND
EXCELL

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax:

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: 20A8293

NPI: 1831162627

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Pomerado
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

EL KAREH, ROBERT E

Provider ID: 63891

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 471-9185

Fax: (619) 543-8255

After Hours Phone: (619)

471-9185

Provider Gender: Male

License number: A112957

NPI: 1497944656

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

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D. Directorio de proveedores de atención especializada

FARKHONDEHPOUR, MOHAMMAD A

Provider ID: 115440
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A134730
NPI: 1265876890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FIRESTEIN, CATHERINE E

Provider ID: 110393
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A143013
NPI: 1427348382
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FREDERICK, WILLIAM J

Provider ID: 83441
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A123614
NPI: 1841592805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GANDHI, NIKHIL R

Provider ID: 63912
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A81799
NPI: 1609934538
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Vibra Hospital Of San Diego, Ucsd Medical Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GELBERG, ANNA

Provider ID: 285638
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A105308
NPI: 1104004258
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Hoag Memorial Hospital Presbyterian, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GRUNVALD, EDUARDO L
Provider ID: 127696
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A65336
NPI: 1497791339
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
GRUNVALD, EDUARDO L
Provider ID: 286343
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR STE 2110
 SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A65336
NPI: 1497791339
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GRUNVALD, EDUARDO L
Provider ID: 286344
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A65336
NPI: 1497791339
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAZELBAKER, PAUL N
Provider ID: 109909
Board Certified Specialty: No
 DOWNTOWN FAMILY CTR AT CONNECTIONS
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2430
Fax:
After Hours Phone: (619) 515-2430
Provider Gender: Male
License number: 20A7147
NPI: 1831106103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Downtown Family Ctr At Connections
IPA:

HENDERSON, PHILIP L

Provider ID: 121132
Board Certified Specialty: No
FAMILY HLTH CTR SD HILLCREST
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2545
Fax:
After Hours Phone: (619) 515-2545
Provider Gender: Male
License number: A140324
NPI: 1447678834
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-TH 8AM-9PM, F 8AM-5PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr Sd Hillcrest
IPA:

HILL, DEANNA L

Provider ID: 64320
Board Certified Specialty: No

UCSD MEDICAL GROUP
 330 LEWIS ST # 400
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Female
License number: A101349
NPI: 1417194614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HOGARTH, MICHAEL A

Provider ID: 214386
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A51060
NPI: 1225019193
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: No
Hospital Affiliation: Uc Davis Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUANG, BRYAN J

Provider ID: 63970
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A87875
NPI: 1881652394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JABBOUR, MOUSSA

Provider ID: 256659

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A148314

NPI: 1255741633

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

JASSAL, SIMERJOT K

Provider ID: 103183

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186

Fax:

After Hours Phone: (619)
471-9186

Provider Gender: Female

License number: A70679

NPI: 1689698052

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

JENKINS, IAN H

Provider ID: 63983

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 471-9198

Fax:

After Hours Phone: (619)
471-9198

Provider Gender: Male

License number: A87009

NPI: 1992762520

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAFI, AARYA

Provider ID: 271608

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A123008

NPI: 1255612339

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KAFI, AARYA

Provider ID: 271609

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121-3028

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A123008

NPI: 1255612339

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KAFI, AARYA

Provider ID: 271610
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A123008
NPI: 1255612339
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
KAHN, ANDREW M
Provider ID: 63985
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A78646
NPI: 1841247384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KAHN, ANDREW M
Provider ID: 64332
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A78646
NPI: 1841247384

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KALUNIAN, KENNETH C

Provider ID: 64580
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (619) 543-3511
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G43645
NPI: 1346269990
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

KARL, BETHANY E Provider ID: 83646 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 471-9186 Fax: (858) 543-8255 After Hours Phone: (619) 471-9186 Provider Gender: Female License number: 20A10783 NPI: 1790980472 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Medical Group(s): IPA: KLINE, LAWRENCE E Provider ID: 118395 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR # 1 SAN DIEGO, CA 92121-3018 Phone: (619) 543-6312 Fax: After Hours Phone: (619) 543-6312 Provider Gender: Male License number: 20A3294 NPI: 1730140278 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
KATZ, YISRAEL Provider ID: 272936 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A158910 NPI: 1730507872	KHALID, SHAFI M Provider ID: 125346 Board Certified Specialty: No SAN DIEGO PAIN CONSULTANTS PROF CORP 5850 OBERLIN DR STE 100 SAN DIEGO, CA 92121-4710 Phone: (858) 485-1523 Fax: After Hours Phone: (858) 485-1523 Provider Gender: Male License number: C51093 NPI: 1750343760 Provider English Spoken: Yes Provider Language(s) Spoken: Bengali, Farsi, Spanish, Tagalog, Urdu Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: www.sdpain.org Email:	KOMSOUKANIANTS, ARKADY Provider ID: 116695 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 471-9186 Fax: After Hours Phone: (619) 471-9186

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A139258
NPI: 1720498959
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KOOLA, JEJO D

Provider ID: 111071
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A122014
NPI: 1073775532
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
KRIJGER, LISA C
Provider ID: 124279
Board Certified Specialty: No
 IHP ST VINCENT DE PAUL VILLAGE
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax:
After Hours Phone: (619) 233-8500
Provider Gender: Female
License number: A67762
NPI: 1932278710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8AM-5:30PM, SA 9AM-5PM
Website:
Email:
Medical Group(s): St Vincent De Paul Village Family Health Center
IPA:

KVIATKOVSKY, MILLA J

Provider ID: 274003
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Female
License number: 20A15453
NPI: 1366855355
Provider English Spoken: Yes
Provider Language(s) Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KWAK, KEVIN W

Provider ID: 116427
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A149375
NPI: 1033538632
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LAGO HERNANDEZ, CARLOS A

Provider ID: 238622

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A146029

NPI: 1558756270

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAM, MICHAEL T

Provider ID: 274410

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121-3028

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A141055

NPI: 1578974259

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LAM, MICHAEL T

Provider ID: 274411

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A141055

NPI: 1578974259

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

LEE, DANIEL

Provider ID: 64596

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-3995

Fax: (619) 543-7841

After Hours Phone: (619)

543-3995

Provider Gender: Male

License number: A61630

NPI: 1104876093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

LEVERONE, NICHOLAS A

Provider ID: 272692

Board Certified Specialty: No

UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A159232
NPI: 1407388564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LONERGAN, JOSEPH T
Provider ID: 63158
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-3995
Fax:
After Hours Phone: (619) 543-3995
Provider Gender: Male
License number: A55815
NPI: 1962427310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOOMBA, ROHIT
Provider ID: 64603
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 2
SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Male
License number: A98657
NPI: 1578593521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LUNDE, OTTAR V
Provider ID: 64349
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 400

SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: A97573
NPI: 1932257268
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Norwegian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAJITHIA, AMIT R
Provider ID: 255882
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C158025
NPI: 1801091459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MARC AURELE, KRISHELLE L

Provider ID: 118776

Board Certified Specialty: No

RADY CHILDRENS

*SPECIALISTS SAN DIEGO MED
FN D TN*

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARC AURELE, KRISHELLE L

Provider ID: 52542

Board Certified Specialty: No

RADY CHILDRENS

*SPECIALISTS SAN DIEGO MED
FN D TN*

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-3759

Fax: (619) 543-3812

After Hours Phone: (619)

543-3759

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARTIN, LESLIE M

Provider ID: 64065

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: G79006

NPI: 1306895495

Provider English Spoken: Yes

Provider Language(s) Spoken:

Yue Chinese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MCGEHRIN, KEVIN M

Provider ID: 256020

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR

SAN DIEGO, CA 92121-3018

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A140783

NPI: 1972913101

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MCGEHRIN, KEVIN M

Provider ID: 256021
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A140783
 NPI: 1972913101
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MCLNTYRE, JONATHAN S

Provider ID: 117548
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619)
 471-9186
 Provider Gender: Male
 License number: A149315
 NPI: 1134462211
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEHDI, HARSHAL S

Provider ID: 117537
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619)
 471-9186
 Provider Gender: Male
 License number: A149919
 NPI: 1144631359
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEHTA, GITA

Provider ID: 125321
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 400
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9260
 Fax:
 After Hours Phone: (619)
 471-9260
 Provider Gender: Female
 License number: A45647
 NPI: 1538215264
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Punjabi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MEHTA, HIRSCH S

Provider ID: 82844
 Board Certified Specialty: No
 SAN DIEGO CARDIAC CTR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MED GRP INC
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax: (858) 244-6809
After Hours Phone: (858) 244-6800
Provider Gender: Male
License number: A105910
NPI: 1407099799
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEHTA, SANJAY R
Provider ID: 64613
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3
SAN DIEGO, CA 92103-2030
Phone: (858) 657-8000
Fax:
After Hours Phone: (858) 657-8000
Provider Gender: Male
License number: A89714
NPI: 1437150299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MILLER, RUSSELL J
Provider ID: 122251
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A108650
NPI: 1619175528
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
MOAZZAM, ALAN A
Provider ID: 120032
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A121629
NPI: 1811218274
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Huntington Hospital, Huntington Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MONTGRAIN, PHILIPPE R
Provider ID: 64096
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A82120
NPI: 1629279997
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOYO, STEVEN C
Provider ID: 110487
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A137142
NPI: 1720354095
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
MUNCE, DANIELLE F
Provider ID: 272577
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A152693
NPI: 1740644509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NAMAZY, DAVID S , MD
Provider ID: 258027
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A74630
NPI: 1477558013

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NAMAZY, DAVID S , MD
Provider ID: 258028
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A74630
NPI: 1477558013
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

NGUYEN, KATHERINE H

Provider ID: 279375
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: G79343
NPI: 1356319875
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

NGUYEN, TONY TAN

Provider ID: 24568
Board Certified Specialty: No
 NR MEDICAL ASSOCIATES
 555 WASHINGTON ST
 SAN DIEGO, CA 92103-2289

Phone: (619) 250-8300
Fax:
After Hours Phone: (619)
 250-8300
Provider Gender: Male
License number: G67119
NPI: 1609839299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Vibra Hospital
 Of San Diego, Garden Grove
 Hospital And Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

NOBARI, MATTHEW M

Provider ID: 119529
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR # 2
 SAN DIEGO, CA 92121-3018
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

NOBARI, MATTHEW M

Provider ID: 242035
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (855) 355-5864
Fax:
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: A145102
NPI: 1619140902
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

NOKES, BRANDON T

Provider ID: 287582
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A155580
NPI: 1487040051
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ORR, JEREMY E

Provider ID: 99606
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax: (619) 543-8255
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica UCLA Med Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ORR, JEREMY E

Provider ID: 99610
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 355-5864
Fax: (858) 657-6171
After Hours Phone: (858) 355-5864
Provider Gender: Male
License number: A111366
NPI: 1992940969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica UCLA Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PARDEE, PERRIE E

Provider ID: 101191
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A123826
NPI: 1578850988
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, BIJAL V

Provider ID: 257501
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A74638
NPI: 1639266026
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, KRUTI

Provider ID: 276541
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C170176
NPI: 1043574262
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

PRATHIPATI, LAKSHMI

Provider ID: 53410
Board Certified Specialty: No
 KUMARA PRATHIPATI MD INC
 4276 54TH PL STE B
 SAN DIEGO, CA 92115-6011
Phone: (619) 286-3222
Fax: (619) 286-3223
After Hours Phone: (619) 286-3222
Provider Gender: Female
License number: A47821
NPI: 1245338490
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

QUARTAROLO, JENNIFER M

Provider ID: 64149
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A96235
NPI: 1841213865

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

RAISINGHANI, AJIT B

Provider ID: 64630
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G75914
NPI: 1831292796
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):

IPA:

RAMOS, PEDRO

Provider ID: 64153

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (619) 543-8255

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A91945

NPI: 1861566366

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RENARD, AYSEL

Provider ID: 271842

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A169429

NPI: 1225567456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Turkish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

RIES, DAVID C

Provider ID: 87181

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186

Fax: (619) 543-8255

After Hours Phone: (619)

471-9186

Provider Gender: Male

License number: A127233

NPI: 1376705483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

RIVERA, TANIA L

Provider ID: 78921

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Female

License number: A126958

NPI: 1336346972

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

SANTOS CAVAIOLA, TRICIA

Provider ID: 84769

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Female
 License number: A108282
 NPI: 1518163799
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SASAKI, REID A
 Provider ID: 64182
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax: (619) 543-8255
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A112780
 NPI: 1972817302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:
SCHMICKL, CHRISTOPHER N
 Provider ID: 127692
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858) 657-8860
 Provider Gender: Male
 License number: A155053
 NPI: 1720498496
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SCHOOLEY, ROBERT T
 Provider ID: 64641
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030

Phone: (858) 657-8000
 Fax:
 After Hours Phone: (858) 657-8000
 Provider Gender: Male
 License number: C51865
 NPI: 1346298502
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SEBASKY, MEGHAN M
 Provider ID: 273962
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax: (619) 543-8255
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A114146
 NPI: 1538351408
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No 📞 Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group SEGAR, SANDEEP Provider ID: 116375 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A149780 NPI: 1982017067 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No 📞 Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: SEYMANN, GREGORY B Provider ID: 64195 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911	Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A55150 NPI: 1710920442 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No 📞 Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: SHAHATTO, LOBNA Provider ID: 129681 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000 Provider Gender: Female License number: A117647 NPI: 1477879906 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL):	No 📞 Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group SHAHATTO, LOBNA Provider ID: 201324 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000 Provider Gender: Female License number: A117647 NPI: 1477879906 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 18/999 American Sign Language (ASL): No 📞 Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group SMITHERMAN, KENTON O Provider ID: 64208 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: G84563

NPI: 1205888724

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SMITH, CHELSEY J

Provider ID: 239920

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (858) 657-6110

Fax:

After Hours Phone: (858)
657-6110

Provider Gender: Female

License number: A126660

NPI: 1013264506

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 18/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SMITH, DAVID M

Provider ID: 52340

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Provider Gender: Male

License number: A63610

NPI: 1609891761

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady

Childrens Hospital San Diego,

Scripps Green Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park
Family Health Centers

IPA:

SPECKART, PAUL F

Provider ID: 64652

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)
543-6248

Provider Gender: Male

License number: C31776

NPI: 1447346192

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Ucsd

Medical Ctr, Scripps Mercy

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TANTISIRA, LALITA K

Provider ID: 275926

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR

SAN DIEGO, CA 92121-3018

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: C170095

NPI: 1508874298

Provider English Spoken: Yes

Provider Language(s) Spoken:

Thai

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No 🔊 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group	200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A169407 <i>NPI:</i> 1033572995 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No 🔊 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group	<i>American Sign Language (ASL):</i> No 🔊 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group
TANTISIRA, LALITA K <i>Provider ID:</i> 275927 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> C170095 <i>NPI:</i> 1508874298 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Thai <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No 🔊 <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group	THOMAS, ROBERT L <i>Provider ID:</i> 238929 <i>Board Certified Specialty:</i> Yes UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> A151319 <i>NPI:</i> 1053765909 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/999	VAFADARAN, ASHKAN <i>Provider ID:</i> 109494 <i>Board Certified Specialty:</i> No DTFHC AT CONNECTIONS 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2430 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2430 <i>Provider Gender:</i> Male <i>License number:</i> A137394 <i>NPI:</i> 1659634517 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No 🔊 <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:
TAYLOR, DAVID S <i>Provider ID:</i> 274469 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP	<i>Min/Max Age:</i> 18/999	VARUGHESE, JAY I <i>Provider ID:</i> 64239 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
 Fax: (619) 543-8255
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A105937
 NPI: 1447490230
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VODKIN, IRINE E
 Provider ID: 102009
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-5415
 Fax:
 After Hours Phone: (619) 543-5415
 Provider Gender: Female
 License number: A113664
 NPI: 1861762619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessability: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VODKIN, IRINE E
 Provider ID: 102012
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-5415
 Fax:
 After Hours Phone: (619) 543-5415
 Provider Gender: Female
 License number: A113664
 NPI: 1861762619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

VUONG, NHAN D
 Provider ID: 117217
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 471-9186
 Fax:
 After Hours Phone: (619) 471-9186
 Provider Gender: Male
 License number: A132811
 NPI: 1194169573
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WANG, ANGELA C
 Provider ID: 259534
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
 Phone: (855) 355-5864
 Fax: (888) 539-8781
 After Hours Phone: (855) 355-5864
 Provider Gender: Female
 License number: G62974
 NPI: 1730133976
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):

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D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WANG, ANGELA C

Provider ID: 259535
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: G62974
 NPI: 1730133976
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital, Ucsd Medical
 Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WEBSTER, LUKE A

Provider ID: 272681
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A159228
 NPI: 1235660887
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WINTERS, KATHRYN D

Provider ID: 115623
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 471-9185
 Fax:
 After Hours Phone: (619)
 471-9185
 Provider Gender: Female
 License number: A141944
 NPI: 1790128924
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL):
 No
 ☞ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WITZTUM, JOSEPH L

Provider ID: 64664
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619)
 543-6248
 Provider Gender: Male
 License number: G29598
 NPI: 1699791491
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☞ Accessibility: W
 Hours: M-F 8AM-5PM, SA
 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WOOTEN, DARCY A

Provider ID: 130066
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 471-9186
 Fax: (619) 543-8255
 After Hours Phone: (619) 471-9186
 Provider Gender: Female
 License number: A114007
 NPI: 1538495973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WYATT, WENDELL D

Provider ID: 255535
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8899 UNIVERSITY CENTER LN STE 220
 SAN DIEGO, CA 92122-1040
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: C136244
 NPI: 1316906696
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes

Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YANG, JENNY Z

Provider ID: 283026
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A145538
 NPI: 1346636453
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YANG, JENNY Z

Provider ID: 283027
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A145538
 NPI: 1346636453
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YOUNG, MAILE A

Provider ID: 64667
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-3995
 Fax:
 After Hours Phone: (619) 543-3995
 Provider Gender: Female
 License number: A93568
 NPI: 1093904997
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZARRINPAR, AMIR

Provider ID: 84248
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A110886
NPI: 1417110917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZAYETS, STANISLAV

Provider ID: 123480
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9186
Fax:
After Hours Phone: (619) 471-9186
Provider Gender: Male
License number: A141681
NPI: 1437313178
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZHANG, SHERRY S

Provider ID: 272657
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A158102
NPI: 1588198147
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD

Provider ID: 244810
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 292 EUCLID AVE STE 210
 SAN DIEGO, CA 92114-3629
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Garfield Medical Center, Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOUSSAVIAN, MEHRAN

Provider ID: 114977

Board Certified Specialty: No

CARDIOVASCULAR INSTITUTE
OF SAN DIEGO

292 EUCLID AVE STE 210

SAN DIEGO, CA 92114-3629

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)

616-2100

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Tri City Medical

Ctr, Sharp Memorial Hospital,

Alvarado Hospital Llc, Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOUSSAVIAN, MEHRAN

Provider ID: 126078

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 263-2499

Fax:

After Hours Phone: (619)

263-2499

Provider Gender: Male

License number: 20A7241

NPI: 1689788234

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Tri City Medical

Ctr, Sharp Memorial Hospital,

Alvarado Hospital Llc, Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs
Inc

IPA: Community Care Ipa Llc

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY

Provider ID: 239584

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 315

SAN DIEGO, CA 92121-3029

Phone: (858) 534-8019

Fax:

After Hours Phone: (858)

534-8019

Provider Gender: Female

License number: LPCC4383

NPI: 1356846349

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MATERNAL AND FETAL MEDICINE

ADAMCZAK, JOANNA E

Provider ID: 205633

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E

Provider ID: 258901

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, Sharp Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E

Provider ID: 277210

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ADAMCZAK, JOANNA E

Provider ID: 287119

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 220

SAN DIEGO, CA 92123-2781

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A116982

NPI: 1447428420

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272669

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

License number: A149389

NPI: 1992149447

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272670
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 272674
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST # 463
SAN DIEGO, CA 92123-2771
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 277179
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ADAMI, REBECCA R

Provider ID: 287129
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858)
966-6710
Provider Gender: Female
License number: A149389
NPI: 1992149447
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CASELE, HOLLY L

Provider ID: 205838

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Memorial Hospital Encinitas,

Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CASELE, HOLLY L

Provider ID: 258870

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 939-4102

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Memorial Hospital Encinitas,

Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CASELE, HOLLY L

Provider ID: 277247

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: G87630

NPI: 1255348744

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Grossmont

Hospital, Tri City Medical Ctr,

Sharp Mary Birch Hosp For

Women And Newborns, Scripps

Memorial Hospital Encinitas,

Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

CASELE, HOLLY L

Provider ID: 287071

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 220

SAN DIEGO, CA 92123-2781

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: G87630
NPI: 1255348744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 205744
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6266
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes

Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 258850
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps

Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CATANZARITE, VALERIAN A

Provider ID: 287061
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Grossmont Hospital,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	7910 FROST ST STE 220 SAN DIEGO, CA 92123-2781 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A99128 <i>NPI:</i> 1538146337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
ESFANDIARI, RAHELEH <i>Provider ID:</i> 242013 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3003 HEALTH CENTER DR SAN DIEGO, CA 92123-2700 <i>Phone:</i> (858) 939-3400 <i>Fax:</i> (858) 277-1475 <i>After Hours Phone:</i> (858) 939-3400 <i>Provider Gender:</i> Female <i>License number:</i> A100932 <i>NPI:</i> 1235320185 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	ESFANDIARI, RAHELEH <i>Provider ID:</i> 287055 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 220 SAN DIEGO, CA 92123-2781 <i>Phone:</i> (858) 966-6710 <i>Fax:</i> (858) 966-6711 <i>After Hours Phone:</i> (858) 966-6710 <i>Provider Gender:</i> Female <i>License number:</i> A100932 <i>NPI:</i> 1235320185 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	LAURENT, LOUISE C <i>Provider ID:</i> 208640 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A80409 <i>NPI:</i> 1770532707
HUSKEY, DANA E <i>Provider ID:</i> 287125 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK	HUSKEY, DANA E <i>Provider ID:</i> 287125 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCULLOUGH, DEIRDRE M
Provider ID: 210033
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M
Provider ID: 210034
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M
Provider ID: 277260
Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCULLOUGH, DEIRDRE M
Provider ID: 287117
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: C159758
NPI: 1639153018
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Sharp Grossmont Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MOORE, THOMAS R

Provider ID: 208643
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
MOORE, THOMAS R
Provider ID: 208644
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G49930
NPI: 1184682379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RICHARDSON, ALVIE C

Provider ID: 214435
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 214436
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: C160063
NPI: 1154305977
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

RICHARDSON, ALVIE C

Provider ID: 277314

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: C160063

NPI: 1154305977

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RICHARDSON, ALVIE C

Provider ID: 287096

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: C160063

NPI: 1154305977

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Rady
Childrens Hospital San Diego,
Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RICHARD, JOHN D

Provider ID: 217176

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: A96329

NPI: 1568448116

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Naval Medical
Ctr Sd Rbe, Sharp Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RICHARD, JOHN D

Provider ID: 217177

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 140
SAN DIEGO, CA 92123-2712

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)
966-6710

Provider Gender: Male

License number: A96329

NPI: 1568448116

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Naval Medical
Ctr Sd Rbe, Sharp Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D

Provider ID: 205438

Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D

Provider ID: 277304
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228

NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D

Provider ID: 277307
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary

Birch Hosp For Women And
Newborns, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWENDEMANN, WADE D

Provider ID: 287080
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 220
SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: A109228
NPI: 1477563302
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital,
Grossmont Hospital, Sharp
Memorial Hospital, Sharp Mary
Birch Hosp For Women And
Newborns, Tri City Medical Ctr,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

THOMAS, STEVEN J

Provider ID: 209479
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6600
Fax: (619) 543-5767
After Hours Phone: (619) 543-6600
Provider Gender: Male
License number: A40379
NPI: 1639242589
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Palomar Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TITH, TEVY

Provider ID: 205388
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITH, TEVY

Provider ID: 262371
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITH, TEVY

Provider ID: 277325
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TITH, TEVY

Provider ID: 287052
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And

Newborns, University Of California Irvine Med Ctr, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 242521
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WESTERMANN, MELISSA L

Provider ID: 242522
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A130149
NPI: 1760730758
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Mary Birch Hosp For Women And Newborns, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, University Of California Irvine Med Ctr, Sharp Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

WESTERMANN, MELISSA L

Provider ID: 277353

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Earl And Lorraine

Miller Childrens Hsp, Long Beach

Memorial Med Ctr, University Of

California Irvine Med Ctr, Sharp

Memorial Hospital, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WESTERMANN, MELISSA L

Provider ID: 287084

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 220

SAN DIEGO, CA 92123-2781

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A130149

NPI: 1760730758

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Mary

Birch Hosp For Women And

Newborns, Earl And Lorraine

Miller Childrens Hsp, Long Beach

Memorial Med Ctr, University Of

California Irvine Med Ctr, Sharp

Memorial Hospital, Grossmont

Hospital, Sharp Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WILLIAMS, KRISTIN M

Provider ID: 206229

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford

Health Care, Lucile Salter

Packard Childrens Hosp, San

Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

California Pacific Med Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

WILLIAMS, KRISTIN M

Provider ID: 277383

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford

Health Care, Lucile Salter

Packard Childrens Hosp, San

Mateo Medical Ctr, Sharp

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D. Directorio de proveedores de atención especializada

Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 277387
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3003 HEALTH CENTER DR
 SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WILLIAMS, KRISTIN M

Provider ID: 287114
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 220
 SAN DIEGO, CA 92123-2781
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A72985
NPI: 1992847131
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford Health Care, Lucile Salter Packard Childrens Hosp, San Mateo Medical Ctr, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Tri City Medical Ctr, California Pacific Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network

WOLF, RICHARD B

Provider ID: 209253
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A6028
NPI: 1497713846
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE M

Provider ID: 205727
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A118050
NPI: 1386928224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CASSEY, LINDSAY E

Provider ID: 270421
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 220 EUCLID AVE STE 30
 SAN DIEGO, CA 92114-3617
Phone: (209) 576-3526
Fax:
After Hours Phone: (209) 576-3526
Provider Gender: Female
License number: 20A14218
NPI: 1457762619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COHENMEYER, CASEY L

Provider ID: 206102
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7483
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A80114
NPI: 1033286430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Southwest Healthcare System Murrieta, Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

CULWELL, KELLY R

Provider ID: 270475
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 220 EUCLID AVE STE 30
 SAN DIEGO, CA 92114-3617
Phone: (916) 734-6925
Fax:
After Hours Phone: (916) 734-6925
Provider Gender: Female
License number: A76983
NPI: 1043508377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Uc Davis Medical Ctr, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FARRELL, MAUREEN E

Provider ID: 270157
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2017 1ST AVE STE 201
 SAN DIEGO, CA 92101-2033
Phone: (619) 881-4589
Fax:
After Hours Phone: (619) 881-4589
Provider Gender: Female
License number: A82843

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

NPI: 1508842303
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Naval Hsp Camp Pendleton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FLEMING, SARAH E

Provider ID: 205645
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
 Phone: (619) 260-7046
 Fax: (619) 686-3843
 After Hours Phone: (619) 260-7046
 Provider Gender: Female
 License number: A89838
 NPI: 1679809826
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

GOLEMBESKI, DAVID J

Provider ID: 205892
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-3759
 Fax: (619) 543-3812
 After Hours Phone: (619) 543-3759
 Provider Gender: Male
 License number: G63111
 NPI: 1376614131
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Pomerado Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Palomar Medical Center, Scripps Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HONOLD, JOSE A

Provider ID: 205941
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
 Provider Gender: Male
 License number: A51798
 NPI: 1093886855
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HONOLD, JOSE A

Provider ID: 242881
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105

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D. Directorio de proveedores de atención especializada

Phone: (619) 691-7000

Fax:

After Hours Phone: (619) 691-7000

Provider Gender: Male

License number: A51798

NPI: 1093886855

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 262264

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A99128

NPI: 1538146337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 262266

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

License number: A99128

NPI: 1538146337

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And

Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KO, KIMBERLY J

Provider ID: 214506

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800) 926-8273

Provider Gender: Female

License number: A77120

NPI: 1437448917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

LANE, BRIAN P

Provider ID: 205707

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Male

License number: A73829

NPI: 1427129287

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital

Encinitas, Scripps Memorial

Hospital, Sharp Chula Vista Med

Ctr, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

LEIBEL, SANDRA L

Provider ID: 205951

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A121976

NPI: 1407024995

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Polish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

LE, CRYSTAL N

Provider ID: 205630

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: A97634

NPI: 1003028416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Scripps Memorial Hospital

Encinitas, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MARC AURELE, KRISHELLE L

Provider ID: 206206

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (619) 543-3812

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr, Ucsd La Jolla

John Sally Thornton, Tri City

Medical Ctr, Scripps Memorial

Hospital

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/0

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARC AURELE, KRISHELLE L

Provider ID: 206208

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)
966-5818

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARC AURELE, KRISHELLE L

Provider ID: 206210

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-8022

Fax: (858) 966-8457

After Hours Phone: (858)
966-8022

Provider Gender: Female

License number: A99634

NPI: 1952503435

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARDOUM, RIAD

Provider ID: 206152

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK

4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)
260-7046

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Rady Childrens
Hospital San Diego, Scripps
Mercy Hospital Chula Vista, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MARDOUM, RIAD

Provider ID: 262122

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)
966-5818

Provider Gender: Male

License number: A36720

NPI: 1417050584

Provider English Spoken: Yes

Provider Language(s) Spoken:
Arabic, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MARENGO BARBICK, ANTOINETTE

Provider ID: 271176
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2017 1ST AVE STE 301
 SAN DIEGO, CA 92101-2033
Phone: (619) 881-4500
Fax:
After Hours Phone: (619) 881-4500
Provider Gender: Female
License number: A87783
NPI: 1144200718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCCULLEY, DAVID J

Provider ID: 277177
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
License number: A88660
NPI: 1235304155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MESTAN, KAREN K

Provider ID: 285932
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5888
Fax:
After Hours Phone: (858) 966-5888

Provider Gender: Female
License number: C173648
NPI: 1942253356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MODY, SHEILA K

Provider ID: 270296
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 2017 1ST AVE STE 100
 SAN DIEGO, CA 92101-9001
Phone: (619) 543-6777
Fax:
After Hours Phone: (619) 543-6777
Provider Gender: Female
License number: A117818
NPI: 1952561102
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOYER, LAUREL B

Provider ID: 205399
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: C144070
NPI: 1598970378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MOYER, LAUREL B

Provider ID: 283257
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: C144070
NPI: 1598970378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NIEMI, ANNA-KAISA

Provider ID: 262157
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NIEMI, ANNA-KAISA

Provider ID: 262158
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 260-7107
Fax:
After Hours Phone: (619) 260-7107
Provider Gender: Female
License number: A104907
NPI: 1497941397
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ODONNELL, F JANE D

Provider ID: 205578

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: G81056
NPI: 1477625325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAMOS, CARLOS G

Provider ID: 206060
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619) 543-3759
Provider Gender: Male
License number: A91944
NPI: 1205047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, El Centro Regional Medical Center, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ROBERTSON, LAUREN A

Provider ID: 271054
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2017 1ST AVE STE 100
 SAN DIEGO, CA 92101-9001
Phone: (858) 455-7520
Fax:
After Hours Phone: (858) 455-7520
Provider Gender: Female
License number: A109671
NPI: 1710211867
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SAJTI, ENIKO C

Provider ID: 206171
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619) 543-3759
Provider Gender: Female
License number: A115973
NPI: 1649433103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

SHANNON, KELLI K

Provider ID: 208474
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A125621
NPI: 1922156397
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SONG, RICHARD S

Provider ID: 206143
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
License number: A112147
NPI: 1881893477
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Palomar Health Downtown Campus, Pomerado Hospital, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SPEZIALE, MARK V

Provider ID: 206126
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
License number: G78658

NPI: 1801978143
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Scripps Mercy Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SUTTNER, DENISE M

Provider ID: 265085
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A52313
NPI: 1457433799
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps

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D. Directorio de proveedores de atención especializada

Memorial Hospital Encinitas,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Scripps
Memorial Hospital, Scripps
Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SWEENEY, NATHALY M

Provider ID: 206182
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: A110761
NPI: 1164572632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
Network
VAUCHER, YVONNE E
Provider ID: 205652
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 260-7046
Fax:
After Hours Phone: (619)
260-7046
Provider Gender: Female
License number: G25444
NPI: 1275615510
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

Provider ID: 206182
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: A110761
NPI: 1164572632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/0
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WEISS, KATHERINE J

Provider ID: 264677
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Female
License number: C154876
NPI: 1053541862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NEPHROLOGY

AHMED, KAMAL E

Provider ID: 63771
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: C50781
NPI: 1952352411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic, French, Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BARANSKI, JOEL J
 Provider ID: 257541
 Board Certified Specialty: No
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619)
 299-2350
 Provider Gender: Male
 License number: G67559
 NPI: 1548265234
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Kindred
 Hospital San Diego, Sharp
 Coronado Hosp And Healthcare
 Ctr, Scripps Mercy Hospital,
 Vibra Hospital Of San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: P, IB, E, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Imperial Health Holdings

Medical Group-Sd
BARANSKI, JOEL J
 Provider ID: 31396
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619)
 299-2350
 Provider Gender: Male
 License number: G67559
 NPI: 1548265234
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Kindred
 Hospital San Diego, Sharp
 Coronado Hosp And Healthcare
 Ctr, Scripps Mercy Hospital,
 Vibra Hospital Of San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, IB, E, W
 Hours: M-F 9AM-5PM, SA
 9AM-5PM
 Website: www.balboacare.com
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Imperial Health Holdings
 Medical Group-Sd

BARANSKI, JOEL J
 Provider ID: 31396
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC

4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619)
 299-2350
 Provider Gender: Male
 License number: G67559
 NPI: 1548265234
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Kindred
 Hospital San Diego, Sharp
 Coronado Hosp And Healthcare
 Ctr, Scripps Mercy Hospital,
 Vibra Hospital Of San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: P, IB, E, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc, Imperial Health Holdings
 Medical Group-Sd

BARANSKI, JOEL J , MD
 Provider ID: 31396
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
 Phone: (619) 299-2350
 Fax: (619) 297-8379
 After Hours Phone: (619)
 299-2350
 Provider Gender: Male
 License number: G67559

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1548265234
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Kindred Hospital San Diego, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital, Vibra Hospital Of San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, IB, E, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BEBEN, TOMASZ
 Provider ID: 101291
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A113430
 NPI: 1689839441
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Polish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BEHREND, TERRY L
 Provider ID: 262197
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 6402 EL CAJON BLVD # 100
 SAN DIEGO, CA 92115-2645
 Phone: (619) 582-4490
 Fax: (619) 582-4737
 After Hours Phone: (619) 582-4490
 Provider Gender: Male
 License number: A75812
 NPI: 1790780484
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BEHREND, TERRY L
 Provider ID: 87090
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED

GRP INC
 6402 EL CAJON BLVD # 100
 SAN DIEGO, CA 92115-2645
 Phone: (619) 582-4490
 Fax: (619) 582-4737
 After Hours Phone: (619) 582-4490
 Provider Gender: Male
 License number: A75812
 NPI: 1790780484
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 7:30AM-4PM, SA 9AM-5PM
 Website: bnmg.org
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BEHREND, TERRY L , MD
 Provider ID: 87090
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED
 GRP INC
 6402 EL CAJON BLVD # 100
 SAN DIEGO, CA 92115-2645
 Phone: (619) 582-4490
 Fax: (619) 582-4737
 After Hours Phone: (619) 582-4490
 Provider Gender: Male
 License number: A75812
 NPI: 1790780484
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A93600 <i>NPI:</i> 1255514618 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
BENADOR, NADINE M <i>Provider ID:</i> 52563 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (999) 999-9999 <i>Fax:</i> <i>After Hours Phone:</i> (999) 999-9999 <i>Provider Gender:</i> Female <i>License number:</i> A84483 <i>NPI:</i> 1366513129 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>	BROWN, KRISTIAN L <i>Provider ID:</i> 262237 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 8010 FROST ST STE 510 SAN DIEGO, CA 92123-4284 <i>Phone:</i> (858) 637-4800 <i>Fax:</i> (858) 637-4801 <i>After Hours Phone:</i> (858) 637-4800 <i>Provider Gender:</i> Male <i>License number:</i> A124291 <i>NPI:</i> 1023272051 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd	DAVIS, JASON T <i>Provider ID:</i> 62916 <i>Board Certified Specialty:</i> No BALBOA NEPHROLOGY MED GRP INC 8010 FROST ST STE 510 SAN DIEGO, CA 92123-4284 <i>Phone:</i> (858) 637-4800 <i>Fax:</i> (858) 637-4801 <i>After Hours Phone:</i> (858) 637-4800 <i>Provider Gender:</i> Male <i>License number:</i> A100799 <i>NPI:</i> 1295911469 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No
CARTER, CAITLIN E <i>Provider ID:</i> 68211 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra Hospital Of San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DAVIS, JASON T

Provider ID: 80404
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax:
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra

Hospital Of San Diego, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, IB, E, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

DAVIS, JASON T

Provider ID: 80404
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: A100799
NPI: 1295911469
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Kindred Hospital San Diego, Scripps Mercy Hospital, Vibra Hospital Of San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FARAVARDEH, ARMAN

Provider ID: 262114
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858) 637-4800
Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FARAVARDEH, ARMAN, MD

Provider ID: 82852

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858) 637-4800
Provider Gender: Male
License number: A94375
NPI: 1467410019
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FARAVARDEH, ARMAN

Provider ID: 82852
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax:
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A94375
NPI: 1467410019

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Swedish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

GANESAN, LAKSHMI L

Provider ID: 289152
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8574
Fax: (858) 966-7789
After Hours Phone: (858) 966-8574
Provider Gender: Female
License number: A127348
NPI: 1821356288
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: Loma Linda University Childrens Hospital, Loma Linda University Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLLAPUDI, RAGHAVA R

Provider ID: 53857
Board Certified Specialty: No
SAN DIEGO CARDIAC CTR MED GRP INC
 3131 BERGER AVE STE 200
 SAN DIEGO, CA 92123-4203
Phone: (858) 244-6800
Fax:
After Hours Phone: (858) 244-6800

Provider Gender: Male
License number: A73392
NPI: 1467429191
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Grossmont Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HALLDORSON, JEFFREY B

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 262155
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858) 637-4800
Provider Gender: Male
License number: G86089
NPI: 1558446351
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HAMMES, JOHN S

Provider ID: 262327
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male

License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HAMMES, JOHN S , MD

Provider ID: 76487
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp

Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HAMMES, JOHN S

Provider ID: 76487
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
 4060 4TH AVE STE 220
 SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax:
After Hours Phone: (619) 299-2350
Provider Gender: Male
License number: G84351
NPI: 1891766994
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Kindred Hospital San Diego, Vibra Hospital Of San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ Accessibility: P, IB, E, W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.balboacare.com
Email:

Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

INGULLI, ELIZABETH G

Provider ID: 52564
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5855

Fax:
After Hours Phone: (858)
966-5855
Provider Gender: Female
License number: G87981
NPI: 1811919244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp
Memorial Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KHAING, KATHY, MD

Provider ID: 205002
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700

Fax:
After Hours Phone: (858)
637-4700
Provider Gender: Female
License number: A127006
NPI: 1912219155
Provider English Spoken: Yes
Provider Language(s) Spoken:
Burmese, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital Chula Vista, Paradise
Valley Hospital, Scripps Mercy
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LUND, GUY L

Provider ID: 262178
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701

After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: A68839

NPI: 1700859279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

LUND, GUY L , MD

Provider ID: 87088
Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701

After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: A68839
NPI: 1700859279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

LUND, GUY L

Provider ID: 87088

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax:

After Hours Phone: (858)
637-4700

Provider Gender: Male

License number: A68839

NPI: 1700859279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Slovak, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MAK, ROBERT H

Provider ID: 206177

Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK

8001 FROST ST # 10

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858)
966-8052

Provider Gender: Male

License number: A43991

NPI: 1740295252

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MAK, ROBERT H

Provider ID: 52566

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)
966-5855

Provider Gender: Male

License number: A43991

NPI: 1740295252

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NAMAZY, DAVID S

Provider ID: 119925

Board Certified Specialty: No
BALBOA NEPHROLOGY MED
GRP INC

6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645

Phone: (619) 582-4490

Fax: (619) 582-4737

After Hours Phone: (619)
582-4490

Provider Gender: Male

License number: A74630

NPI: 1477558013

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-F 7:30AM-4PM, SA
9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website: bnmg.org

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NAMAZY, DAVID S

Provider ID: 262262

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645

Phone: (619) 582-4490

Fax: (619) 582-4737

After Hours Phone: (619)
582-4490

Provider Gender: Male

License number: A74630

NPI: 1477558013

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

NGUYEN, VIET D , MD

Provider ID: 270191

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 220

SAN DIEGO, CA 92103-2120

Phone: (619) 299-2350

Fax: (619) 297-8379

After Hours Phone: (619)
299-2350

Provider Gender: Male

License number: A149088

NPI: 1184019051

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital
Chula Vista, Scripps Mercy
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

NOURBAKHSH, NOUREDDIN D

Provider ID: 101316

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)
966-5855

Provider Gender: Male

License number: 20A11746

NPI: 1801082003

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NOURBAKHSH, NOUREDDIN D

Provider ID: 102313

Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST FL 3

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax: (858) 657-8000

After Hours Phone: (619)

543-6248

Provider Gender: Male

License number: 20A11746

NPI: 1801082003

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Childrens
Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, BIJAL V

Provider ID: 262121
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: A74638
NPI: 1639266026
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, BIJAL V

Provider ID: 34506
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax:

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74638

NPI: 1639266026

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website: bnmg.org

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, BIJAL V , MD

Provider ID: 34506

Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC

8010 FROST ST STE 510

SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858) 637-4700

Provider Gender: Male

License number: A74638

NPI: 1639266026

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PERENS, ELLIOT A

Provider ID: 101300

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Male

License number: A108840

NPI: 1922328947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Medical Ctr At Ucsf

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

QUEVEDO, JUAN M , MD

Provider ID: 269998
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
995 GATEWAY CENTER WAY
STE 207
SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax: (619) 263-9730
After Hours Phone: (619) 263-9729
Provider Gender: Male
License number: A144881
NPI: 1093902496
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

QUEVEDO, JUAN M

Provider ID: 35241
Board Certified Specialty: No
SOUTHERN CALIFORNIA INTERVENTIONAL ASSOC
995 GATEWAY CENTER WAY
STE 207
SAN DIEGO, CA 92102-4544

Phone: (619) 263-9729
Fax:
After Hours Phone: (619) 263-9729
Provider Gender: Male
License number: A144881
NPI: 1093902496
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M,W-F 7:30AM-4PM, TU,SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANCHEZ, AMBER P

Provider ID: 64175
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A91770
NPI: 1700963907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SHAH, MITA M

Provider ID: 262230
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
License number: A71739
NPI: 1194773010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

STEINBERG, STEVEN M

Provider ID: 262281
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
8010 FROST ST STE 510
SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
637-4700
Provider Gender: Male
License number: G17843
NPI: 1407852783
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

THOMAS, THEODORE S

Provider ID: 262359
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4060 4TH AVE STE 220
SAN DIEGO, CA 92103-2120
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619)
299-2350
Provider Gender: Male
License number: G61681
NPI: 1669477113
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Kindred Hospital San Diego,
Vibra Hospital Of San Diego,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

THOMSON, SCOTT C

Provider ID: 64223
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G53658
NPI: 1225052483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

NEUROLOGY CHILD

FRIEDMAN, JENNIFER R

Provider ID: 205835
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999
Provider Gender: Female
License number: G87128
NPI: 1821144478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOLD, JEFFREY J

Provider ID: 205922
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A111541
NPI: 1568773984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GRAVES, JENNIFER S

Provider ID: 261037
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A116811
NPI: 1992849863
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsf Medical Center At Mission Bay, Ucsf

Medical Center At Mount Zion,
 Medical Ctr At Ucsf, Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GRAY, ROBERT M

Provider ID: 261016
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228
Phone: (858) 966-6706
Fax: (858) 966-8519
After Hours Phone: (858) 966-6706
Provider Gender: Male
License number: PSY20705
NPI: 1679616981
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUIDO-ESTRADA, NATALIE M

Provider ID: 205825
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A140052
NPI: 1528353521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HAAS, RICHARD H

Provider ID: 205622
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999

Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, Ucsd La Jolla John
Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HAAS, RICHARD H

Provider ID: 205623
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (619) 543-7800
Fax: (619) 543-3565
After Hours Phone: (619)
543-7800
Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HAAS, RICHARD H

Provider ID: 63936
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A38555
NPI: 1700801867
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KIM MCMANUS, OLIVIA S

Provider ID: 206256
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999

Provider Gender: Female
License number: A120194
NPI: 1174870067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of
California Irvine Med Ctr, Rady
Childrens Hospital San Diego,
Childrens Hospital Of Orange
County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KONERSMAN, CHAMINDRA G

Provider ID: 205501
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax:

After Hours Phone: (858)

966-8052

Provider Gender: Female

License number: A101351

NPI: 1538320395

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NELSON, JAMES E

Provider ID: 205373

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Male

License number: C55868

NPI: 1568434546

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Valley

Childrens Hospital, Ucsd Medical

Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NESPECA, MARK P

Provider ID: 205401

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Male

License number: G65509

NPI: 1942371703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

RISMANCHI, NEGGY

Provider ID: 206017

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: A118427

NPI: 1669759148

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SAHAGIAN, MICHELLE L

Provider ID: 206074

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 966-4930

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: A80990

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1275604035
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

SATTAR, SHIFTEH

Provider ID: 206181
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5999
 Provider Gender: Female
 License number: A103904
 NPI: 1750407300
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health
 Network

NEUROLOGY

ANSARI, HOSSEIN

Provider ID: 92480
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
 Phone: (858) 657-8540
 Fax:
 After Hours Phone: (858)
 657-8540
 Provider Gender: Male
 License number: A121526
 NPI: 1578774949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Tri City Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BEVINS, ELIZABETH A

Provider ID: 241943
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A145182
 NPI: 1013395151
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BREWER, JAMES B

Provider ID: 63818
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: A89348
 NPI: 1033144985
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hebrew
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	SAN DIEGO, CA 92103-1911 <i>Phone:</i> (999) 999-9999 <i>Fax:</i> <i>After Hours Phone:</i> (999) 999-9999 <i>Provider Gender:</i> Male <i>License number:</i> A96574 <i>NPI:</i> 1730247974 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
BUI, JONATHAN D <i>Provider ID:</i> 206005 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-4930 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Male <i>License number:</i> A96574 <i>NPI:</i> 1730247974 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	BUI, JONATHAN D <i>Provider ID:</i> 82151 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (999) 999-9999 <i>Fax:</i> <i>After Hours Phone:</i> (999) 999-9999 <i>Provider Gender:</i> Male <i>License number:</i> A96574 <i>NPI:</i> 1730247974 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady	CHEN, DILLON Y <i>Provider ID:</i> 259994 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> (858) 966-4930 <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Male <i>License number:</i> A133170 <i>NPI:</i> 1841633914 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/99 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
BUI, JONATHAN D <i>Provider ID:</i> 63827 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CHEN, DILLON Y

Provider ID: 259996
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-3759
 Fax: (619) 543-3812
 After Hours Phone: (619) 543-3759
 Provider Gender: Male
 License number: A133170
 NPI: 1841633914

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/99
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

COREY BLOOM, JODY P

Provider ID: 63863
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: G62847
 NPI: 1053400093

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COUGHLIN, DAVID G

Provider ID: 240949
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A162063
 NPI: 1740543784
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

COUGHLIN, DAVID G

Provider ID: 240951

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A162063
 NPI: 1740543784
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DEVOR, WILLIAM N

Provider ID: 287356
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G46493
 NPI: 1093874604
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	200 W ARBOR DR FL 1 SAN DIEGO, CA 92103-1911 Phone: (858) 657-8540 Fax: (888) 539-8781 After Hours Phone: (858) 657-8540 Provider Gender: Female License number: A157861 NPI: 1700177136 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
DEVOR, WILLIAM N Provider ID: 287357 Board Certified Specialty: No UCSD MEDICAL GROUP 4510 EXECUTIVE DR SAN DIEGO, CA 92121-3021 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: G46493 NPI: 1093874604 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	ELLIS, RONALD J Provider ID: 63892 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: G70658 NPI: 1992763114 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No	EVANS, SEAN J Provider ID: 64699 Board Certified Specialty: No UCSD MEDICAL GROUP 4510 EXECUTIVE DR STE 325 SAN DIEGO, CA 92121-3069 Phone: (858) 657-8540 Fax: After Hours Phone: (858) 657-8540 Provider Gender: Male License number: A81217 NPI: 1366503427 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
DUNN-PIRIO, ANASTASIE M Provider ID: 203235 Board Certified Specialty: No UCSD MEDICAL GROUP	FREDERICK, ALIYA L Provider ID: 283152 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
 Fax: (858) 576-8412
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: A148160
 NPI: 1548657992
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd La Jolla John Sally
 Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

FRIEDMAN, JENNIFER R
 Provider ID: 283037
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5999
 Provider Gender: Female
 License number: G87128
 NPI: 1821144478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

FRIEDMAN, JENNIFER R
 Provider ID: 283237
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5819
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5819
 Provider Gender: Female
 License number: G87128
 NPI: 1821144478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

FRIEDMAN, JENNIFER R
 Provider ID: 52575

Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-1700
 Fax:
 After Hours Phone: (858)
 576-1700
 Provider Gender: Female
 License number: G87128
 NPI: 1821144478
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GERTSCH, JEFFREY H
 Provider ID: 63915
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: A88828
 NPI: 1730352287
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GOLD, JEFFREY J

Provider ID: 283335

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)
966-5999

Provider Gender: Male

License number: A111541

NPI: 1568773984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

GONZALEZ, CYNTHIA

Provider ID: 110378

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A131602

NPI: 1871767210

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

GRISOLIA, JAMES S

Provider ID: 262180

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

4033 3RD AVE STE 410

SAN DIEGO, CA 92103-2140

Phone: (619) 297-1155

Fax: (619) 297-7538

After Hours Phone: (619)

297-1155

Provider Gender: Male

License number: G42884

NPI: 1336102359

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings
Medical Group-Sd

GUIDO-ESTRADA, NATALIE M

Provider ID: 109190

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5999

Fax:

After Hours Phone: (858)
966-5999

Provider Gender: Female

License number: A140052

NPI: 1528353521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUNDOGDU, MELEK B

Provider ID: 128070
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: C156629
NPI: 1437253671
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUNDOGDU, MELEK B

Provider ID: 201623
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103-1911

Phone: (619) 543-3500
Fax:
After Hours Phone: (619) 543-3500
Provider Gender: Female
License number: C156629
NPI: 1437253671
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANNAWI, ANDREW P

Provider ID: 283154
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A153161
NPI: 1194179135
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HEMMEN, THOMAS M

Provider ID: 63952
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A72645
NPI: 1902821945
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

HUISA-GARATE, BRANKO N

Provider ID: 110376
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A108574
NPI: 1063551000
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Scripps Mercy Hospital, El Centro Regional Medical Center, Scripps Mercy Hospital Chula Vista, Corona Regional Med Ctr, Temecula Valley Hospital Inc, Ucsd Medical Ctr, Sharp Coronado Hosp And Healthcare Ctr, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IRAGUIMADOZ, VICENTE J

Provider ID: 63979
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A31274
NPI: 1053326710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JABLECKI, CHARLES K

Provider ID: 112351
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
Phone: (858) 657-8540
Fax:
After Hours Phone: (858) 657-8540
Provider Gender: Male
License number: G33067
NPI: 1255315677
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JINDAL, ANUJA V

Provider ID: 119343
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax:
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JINDAL, ANUJA V

Provider ID: 206263
Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A149444
NPI: 1194046581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KANSAL, LEENA R
Provider ID: 63989
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A99271
NPI: 1871759084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHAMISHON, BORIS, MD
Provider ID: 269923
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6699 ALVARADO RD STE 2301
 SAN DIEGO, CA 92120-5241
Phone: (619) 582-2595
Fax: (619) 229-8006
After Hours Phone: (619) 582-2595
Provider Gender: Male
License number: A56165
NPI: 1104922038
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Samoan, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
 Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

KHOROMI, SUZAN
Provider ID: 110429
Board Certified Specialty: No
 UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
Phone: (619) 543-3500
Fax:
After Hours Phone: (619) 543-3500
Provider Gender: Female
License number: G136006
NPI: 1588803340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Memorial Hospital Encinitas,
 Scripps Mercy Hospital, Vibra
 Hospital Of San Diego, Scripps
 Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIM MCMANUS, OLIVIA S
Provider ID: 121365
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax:
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A120194
NPI: 1174870067

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr, Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KINKEL, REVERE P

Provider ID: 83656
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G89360
NPI: 1043325939
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
KONERSMAN, CHAMINDRA G
Provider ID: 110438
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
Phone: (858) 657-8540
Fax:
After Hours Phone: (858) 657-8540
Provider Gender: Female
License number: A101351
NPI: 1538320395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KONERSMAN, CHAMINDRA G

Provider ID: 85229
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052
Fax:
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: A101351
NPI: 1538320395
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LABUZETTA, JAMIE N

Provider ID: 110440
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A130618
NPI: 1316268949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LEE, DAVID J

Provider ID: 246263
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A124329
 NPI: 1871884130
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Korean
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LEGER, GABRIEL C

Provider ID: 247608
 Board Certified Specialty: No
 UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
 Phone: (858) 543-8540
 Fax:
 After Hours Phone: (858) 543-8540
 Provider Gender: Male
 License number: C155902
 NPI: 1720367899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LESSIG, STEPHANIE L

Provider ID: 64036
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A81417
 NPI: 1134167141
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LIPTON, STUART A

Provider ID: 64044
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G85439
 NPI: 1578596292
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LONGARDNER, KATHERINE M

Provider ID: 268346
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A137963
 NPI: 1801215926
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MCGEHRIN, KEVIN M

Provider ID: 243545
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A140783
 NPI: 1972913101
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MEYER, BRETT C

Provider ID: 64083
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A70903
 NPI: 1316011265
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MODIR, ROYYA F

Provider ID: 84287
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A121407
 NPI: 1295909554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

NELSON, JAMES E

Provider ID: 104822
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-5855
 Fax:
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: C55868
 NPI: 1568434546
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Valley

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital, Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NESPECA, MARK P

Provider ID: 52598

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax:

After Hours Phone: (858)

576-1700

Provider Gender: Male

License number: G65509

NPI: 1942371703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NISSINEN, JANNE K

Provider ID: 116418

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121-3069

Phone: (858) 657-8814

Fax:

After Hours Phone: (858)

657-8814

Provider Gender: Male

License number: A123181

NPI: 1710278569

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

OLSON, SCOTT E

Provider ID: 64120

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A83715

NPI: 1376568659

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Tri City

Medical Ctr, Ucsd Medical Ctr,

Pomerado Hospital, Palomar

Medical Center, Scripps Green

Hospital, Ucsd La Jolla John

Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

QAYOUMI, WALI Z

Provider ID: 284370

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121-3069

Phone: (619) 294-3746

Fax: (888) 539-8781

After Hours Phone: (619)

294-3746

Provider Gender: Male

License number: A168429

NPI: 1093178220

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group RHO, JONG M <i>Provider ID:</i> 243628 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5819 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5819 <i>Provider Gender:</i> Female <i>License number:</i> G64857 <i>NPI:</i> 1235243999 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Korean <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network RIGGINS, NINA Y <i>Provider ID:</i> 285968 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4510 EXECUTIVE DR STE 325 SAN DIEGO, CA 92121-3069	<i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A120575 <i>NPI:</i> 1568655264 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Medical Ctr At Ucsf <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group RISMANCHI, NEGGY <i>Provider ID:</i> 118530 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5999 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5999 <i>Provider Gender:</i> Female <i>License number:</i> A118427 <i>NPI:</i> 1669759148 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No	<i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network SCHUMANN, RICHARD J <i>Provider ID:</i> 269967 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16776 BERNARDO CENTER DR STE 209 SAN DIEGO, CA 92128-2559 <i>Phone:</i> (858) 675-1112 <i>Fax:</i> (888) 675-1141 <i>After Hours Phone:</i> (858) 675-1112 <i>Provider Gender:</i> Male <i>License number:</i> A62324 <i>NPI:</i> 1831157916 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Kindred Hospital San Diego, Vibra Hospital Of San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc SHTRAHMAN, MATTHEW <i>Provider ID:</i> 115790
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Male
License number: A108752
NPI: 1740440460

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

SIAVOSHI, SARA S

Provider ID: 110460
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Female
License number: 20A13495
NPI: 1548604101

Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish

Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

TECOMA, EVELYN S

Provider ID: 64219
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222

Fax:
After Hours Phone: (619)
543-6222

Provider Gender: Female
License number: G58138
NPI: 1174556518
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

TRAUNER, DORIS A

Provider ID: 205504
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999

Fax: (858) 966-4930
After Hours Phone: (858)
966-5999

Provider Gender: Female
License number: G25519
NPI: 1124051420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

TRAUNER, DORIS A

Provider ID: 52604
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700

Fax:
After Hours Phone: (858)
576-1700

Provider Gender: Female
License number: G25519
NPI: 1124051420
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TROXELL, REGINA M

Provider ID: 201621
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 201622
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 210761
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
 966-5999
Provider Gender: Female
License number: A157940
NPI: 1013350586

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 265111
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858)
 966-5819
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health
Network, Ucsd Medical Group

TROXELL, REGINA M

Provider ID: 283167
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858)
966-5819
Provider Gender: Female
License number: A157940
NPI: 1013350586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

WANG, CHING H

Provider ID: 275492
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858)
966-5999

Provider Gender: Male
License number: G86512
NPI: 1023144375
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Marin General
Hosp, California Pacific Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

WIEGAND, SARAH E

Provider ID: 284209
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY # 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858)
966-5819
Provider Gender: Female
License number: 20A16503
NPI: 1164818035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

WIEGAND, SARAH E

Provider ID: 284210
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
966-5841
Provider Gender: Female
License number: 20A16503
NPI: 1164818035
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

WIEGAND, SARAH E

Provider ID: 284211
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: 20A16503
 NPI: 1164818035
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

ZIMBRIC, MICHAEL R

Provider ID: 206272
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5999
 Provider Gender: Male
 License number: A95660
 NPI: 1487819546
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr

At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/99
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

ZIMBRIC, MICHAEL R

Provider ID: 283174
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-5999
 Fax: (858) 966-4930
 After Hours Phone: (858)
 966-5999
 Provider Gender: Male
 License number: A95660
 NPI: 1487819546
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network

ZIMBRIC, MICHAEL R

Provider ID: 52605
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-1700
 Fax:
 After Hours Phone: (858)
 576-1700
 Provider Gender: Male
 License number: A95660
 NPI: 1487819546
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NUCLEAR MEDICINE

BELEZZUOLI, ERNEST V

Provider ID: 63804
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G74168
 NPI: 1083703805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BELEZZUOLI, ERNEST V

Provider ID: 64272
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax: (619) 471-9245
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: G74168
 NPI: 1083703805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HOH, CARL K

Provider ID: 63961
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G61309
 NPI: 1962427682
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HOH, CARL K

Provider ID: 64324
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: G61309
 NPI: 1962427682
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OBSTETRICS / GYNECOLOGY

ADAMCZAK, JOANNA E

Provider ID: 69225
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
 Provider Gender: Female
 License number: A116982
 NPI: 1447428420
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,

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D. Directorio de proveedores de atención especializada

Sharp Memorial Hospital, Tri City
Medical Ctr, Sharp Mary Birch
Hosp For Women And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

AGARWAL, SANJAY K
Provider ID: 64523
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: A52018
NPI: 1255489720
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114809
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114818
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Female

License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

ALIMONOS, LYSISTRATI A
Provider ID: 114820
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Provider Gender: Female
License number: 20A14919
NPI: 1619397031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc

IPA:

ALIMONOS, LYSISTRATI A

Provider ID: 114839

Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: 20A14919

NPI: 1619397031

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park Family Health Centers

IPA:

ALIMONOS, LYSISTRATI A

Provider ID: 128384

Board Certified Specialty: No
FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: 20A14919

NPI: 1619397031

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr San Diego-Beach Area

IPA:

BAHADOR, AFSHIN

Provider ID: 66125

Board Certified Specialty: No
SOUTH COAST

GYNECOLOGIC ONCOLOGY INC

3390 CARMEL MOUNTAIN RD
STE 130

SAN DIEGO, CA 92121-1054

Phone: (858) 455-5524

Fax:

After Hours Phone: (858)

455-5524

Provider Gender: Male

License number: A65396

NPI: 1316963713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Faroese, Farsi, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Grossmont Hospital, Sharp Chula Vista Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BROWN, ELISE S

Provider ID: 201761

Board Certified Specialty: No
UCSD MEDICAL GROUP

6719 ALVARADO RD STE 302
SAN DIEGO, CA 92120-5263

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: G85861

NPI: 1801893201

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):
No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group BROWN, ELISE S <i>Provider ID:</i> 282786 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 3750 CONVOY ST STE 312 SAN DIEGO, CA 92111-3741 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> G85861 <i>NPI:</i> 1801893201 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group BRUBAKER, LINDA <i>Provider ID:</i> 113025 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 111 SAN DIEGO, CA 92121-3019	<i>Phone:</i> (858) 657-8860 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8860 <i>Provider Gender:</i> Female <i>License number:</i> G87848 <i>NPI:</i> 1053385195 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> BUECHNER, CHARLENE A <i>Provider ID:</i> 127418 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-BEACH AREA 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME	Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-Beach Area <i>IPA:</i> BUECHNER, CHARLENE A <i>Provider ID:</i> 127428 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

BUECHNER, CHARLENE A

Provider ID: 127429

Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)

515-2420

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

BUECHNER, CHARLENE A

Provider ID: 127455

Board Certified Specialty: No
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park

Family Health Centers

IPA:

BUECHNER, CHARLENE A

Provider ID: 98960

Board Certified Specialty: No
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Sharp Mary

Birch Hosp For Women And

Newborns

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

BUECHNER, CHARLENE A

Provider ID: 98960

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A68463

NPI: 1376663831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i> CARTER, KHALIL J <i>Provider ID:</i> 1227380 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME	<i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Logan Heights Family Health Center <i>IPA:</i> CARTER, KHALIL J <i>Provider ID:</i> 127373 <i>Board Certified Specialty:</i> No FAMILY HLTH CTR SAN DIEGO-BEACH AREA 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2444 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2444 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i> CARTER, KHALIL J <i>Provider ID:</i> 127375 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC	5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i> CARTER, KHALIL J <i>Provider ID:</i> 127376 <i>Board Certified Specialty:</i> No DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2420 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2420 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish
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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

CARTER, KHALIL J

Provider ID: 127381
Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Male
License number: A113001
NPI: 1225231582
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): North Park Family Health Centers
IPA:

CATANZARITE, VALERIAN A

Provider ID: 121848
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6266
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G46026
NPI: 1174694939
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Grossmont Hospital, Tri City Medical Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CERVANTES, SANDRA M

Provider ID: 114860
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2561
Fax:
After Hours Phone: (619) 515-2561
Provider Gender: Female
License number: A118095
NPI: 1073701041
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

CERVANTES, SANDRA M

Provider ID: 114864
Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

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D. Directorio de proveedores de atención especializada

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)
515-2424

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park
Family Health Centers

IPA:

CERVANTES, SANDRA M

Provider ID: 114870

Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond
Neighborhoods Family Hlth Ctrs
Inc

IPA:

CERVANTES, SANDRA M

Provider ID: 114877

Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights
Family Health Centers Inc

IPA:

CERVANTES, SANDRA M

Provider ID: 128379

Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Provider Gender: Female

License number: A118095

NPI: 1073701041

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-W, F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr
San Diego-Beach Area

IPA:

COHEN, MANSOUR J

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Provider ID: 205940
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
7695 CARDINAL CT STE 390
SAN DIEGO, CA 92123-3356
Phone: (858) 279-8111
Fax: (858) 279-4703
After Hours Phone: (858) 279-8111
Provider Gender: Male
License number: A34624
NPI: 1346225356
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Farsi, Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CORMANO, JULIA L

Provider ID: 112487
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A115304

NPI: 1073740395
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEAK, PAMELA W

Provider ID: 64556
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: A54653
NPI: 1316978554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:

DUGGAN, BRIDGETTE D

Provider ID: 66127
Board Certified Specialty: No
SOUTH COAST GYNECOLOGIC ONCOLOGY INC
3390 CARMEL MOUNTAIN RD STE 130
SAN DIEGO, CA 92121-1054
Phone: (858) 455-5524
Fax:
After Hours Phone: (858) 455-5524
Provider Gender: Female
License number: G66287
NPI: 1841212081
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ESKANDER, RAMEZ N
Provider ID: 114324
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A102482

NPI: 1144486929

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: University Of
California Irvine Med Ctr, Earl
And Lorraine Miller Childrens
Hsp, Long Beach Memorial Med
Ctr, Providence St Joseph
Hospital, Providence St Jude
Medical Center, Orange Coast
Mem Med Ctr, Fountain Valley
Regional Hosp And Med Ctr,
Corona Regional Med Ctr, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120486

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
Family Health Center

IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120494

Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)
515-2444

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr
San Diego-Beach Area

IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120508

Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)
515-2400

Provider Gender: Female

License number: A148014

NPI: 1457794752

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights
Family Health Centers Inc

IPA:

FOLCH TORRES-AGUIAR,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

BEATRIZ M

Provider ID: 120509
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

FOLCH TORRES-AGUIAR, BEATRIZ M

Provider ID: 120520
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Female
License number: A148014
NPI: 1457794752
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

FRATTO, VICTORIA M

Provider ID: 97636
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:

After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A136189
NPI: 1124318472
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps

Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRUGONI, GINA R , MD

Provider ID: 270056
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273

Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A99646
NPI: 1578729315
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRUGONI, GINA R

Provider ID: 64563
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: A99646
NPI: 1578729315
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GABBY, LAURYN C

Provider ID: 269692
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A151539
NPI: 1003330572
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GROSS, ERIN A

Provider ID: 64570
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 657-8666
After Hours Phone: (619) 543-6248
Provider Gender: Female
License number: A99544
NPI: 1013175009
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUPTA, PRATIMA

Provider ID: 257547

Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A832373
NPI: 1891749842
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GUPTA, PRATIMA

Provider ID: 257548
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A832373
NPI: 1891749842
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A
Provider ID: 278915
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HARVEY, SCOTT A
Provider ID: 278917
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C169168
NPI: 1457662868
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HEBERT, STEPHEN A
Provider ID: 64573
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: G40602
NPI: 1730127069
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HERRERO, TIFFANY C
Provider ID: 270001
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (650) 243-7942
Fax:
After Hours Phone: (650) 243-7942
Provider Gender: Female
License number: A119846
NPI: 1609140524
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Stanford Health Care, Lucile Salter Packard Childrens Hosp
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOANG, MAI P

Provider ID: 208294
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A130031
NPI: 1104143593
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOM, MARIANNE S

Provider ID: 242751
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A146335
NPI: 1972047397
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HUSKEY, DANA E

Provider ID: 127325
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary

Birch Hosp For Women And Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUSKEY, DANA E

Provider ID: 127326
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A99128
NPI: 1538146337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Palomar Medical Center, Pomerado Hospital, Sierra Vista Regional Med Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No

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D. Directorio de proveedores de atención especializada

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KELLY, THOMAS F

Provider ID: 64584

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax:

After Hours Phone: (619)

543-7878

Provider Gender: Male

License number: G60630

NPI: 1336203496

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital,

Scripps Mercy Hospital, Scripps

Mercy Hospital Chula Vista,

Scripps Memorial Hospital

Encinitas, Palomar Medical

Center

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KINGSTON, JESSICA M

Provider ID: 64586

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)

543-6248

Provider Gender: Female

License number: A70367

NPI: 1538106372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KLEIN, DAVID A

Provider ID: 271560

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A155090

NPI: 1780073635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

KLEIN, DAVID A

Provider ID: 271561

Board Certified Specialty: No

UCSD MEDICAL GROUP

6030 VILLAGE WAY

SAN DIEGO, CA 92130-2972

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A155090

NPI: 1780073635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group KOHATSU, KAREN E <i>Provider ID:</i> 205481 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 11939 RANCHO BERNARDO RD STE 110 SAN DIEGO, CA 92128-2074 <i>Phone:</i> (858) 618-1156 <i>Fax:</i> (858) 618-3314 <i>After Hours Phone:</i> (858) 618-1156 <i>Provider Gender:</i> Female <i>License number:</i> G70665 <i>NPI:</i> 1679517239 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network LACOURSIERE, DAPHNE Y <i>Provider ID:</i> 64594 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030	<i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-5350 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> A74138 <i>NPI:</i> 1316037922 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> LAMALE-SMITH, LEAH M <i>Provider ID:</i> 208681 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4910 DIRECTORS PL STE 200 SAN DIEGO, CA 92121-3814 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A135831 <i>NPI:</i> 1396904876 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group LAMALE-SMITH, LEAH M <i>Provider ID:</i> 99917 <i>Board Certified Specialty:</i> No	<i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group LAMALE-SMITH, LEAH M <i>Provider ID:</i> 285519 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A135831 <i>NPI:</i> 1396904876 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group LAMALE-SMITH, LEAH M <i>Provider ID:</i> 99917 <i>Board Certified Specialty:</i> No
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D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A135831
NPI: 1396904876
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LAURENT, LOUISE C

Provider ID: 64595
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Female
License number: A80409
NPI: 1770532707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIPSCHITZ, LISA S

Provider ID: 115420
Board Certified Specialty: No
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619)
515-2444
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM,

TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
San Diego-Beach Area
IPA:

LIPSCHITZ, LISA S

Provider ID: 115427
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Female
License number: A72005
NPI: 1649208711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

LIPSCHITZ, LISA S

Provider ID: 115428
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560

Fax:

After Hours Phone: (619)
515-2560

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond
Neighborhoods Family Hlth Ctrs
Inc

IPA:

LIPSCHITZ, LISA S

Provider ID: 115432

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Coronado Hosp And Healthcare
Ctr, Scripps Mercy Hospital,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, E, R,
T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park
Family Health Centers

IPA:

LIPSCHITZ, LISA S

Provider ID: 25621

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A72005

NPI: 1649208711

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Grossmont Hospital,
Sharp Coronado Hosp And
Healthcare Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
Family Health Center

IPA:

LOEFFLER, ALLISON M

Provider ID: 115543

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights
Family Health Center

IPA:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

LOEFFLER, ALLISON M

Provider ID: 115545

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park

Family Health Centers

IPA:

LOEFFLER, ALLISON M

Provider ID: 115560

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

LOEFFLER, ALLISON M

Provider ID: 115561

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

LOEFFLER, ALLISON M

Provider ID: 128426

Board Certified Specialty: No

LEMON GROVE FAMILY

HEALTH CENTER

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: A116680

NPI: 1700073962

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ <i>Accessibility:</i> <i>Hours:</i> M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Family Hlth Ctr San Diego-Beach Area <i>IPA:</i>	SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-5350 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> A61603 <i>NPI:</i> 1235154618 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
LUKACZ, EMILY S <i>Provider ID:</i> 64604 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (858) 657-8745 <i>Fax:</i> (858) 657-8666 <i>After Hours Phone:</i> (858) 657-8745 <i>Provider Gender:</i> Female <i>License number:</i> A63540 <i>NPI:</i> 1750339446 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	MACKAY, GILLIAN <i>Provider ID:</i> 200965 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A113346 <i>NPI:</i> 1770702177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	MACKAY, GILLIAN <i>Provider ID:</i> 200966 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A113346 <i>NPI:</i> 1770702177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group
MACAULAY, KATHRYN M <i>Provider ID:</i> 64606 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST	MACKAY, GILLIAN <i>Provider ID:</i> 200965 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 16950 VIA TAZON SAN DIEGO, CA 92127-1607 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A113346 <i>NPI:</i> 1770702177 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999	MANI, PARVIN P <i>Provider ID:</i> 242345 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5555 RESERVOIR DR STE 208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92120-5187
Phone: (619) 583-7555
Fax: (619) 583-0555
After Hours Phone: (619) 583-7555
Provider Gender: Female
License number: A52580
NPI: 1518925015
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Mary Birch Hosp For Women And Newborns, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

MANSOUR, ANMAR A
Provider ID: 204717
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 7695 CARDINAL CT STE 370
 SAN DIEGO, CA 92123-3332
Phone: (858) 277-1599
Fax: (858) 225-7261
After Hours Phone: (866) 558-7293
Provider Gender: Female
License number: A92470
NPI: 1881617884
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women And Newborns, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☞ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCCAULLEY, JILL A
Provider ID: 110414
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121-3814
Phone: (858) 657-7200
Fax:
After Hours Phone: (858) 657-7200
Provider Gender: Female
License number: A131156
NPI: 1669607388
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
MCNALLY, COLLEEN P
Provider ID: 209894
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3750 CONVOY ST STE 312
 SAN DIEGO, CA 92111-3741
Phone: (619) 543-7400
Fax: (619) 543-7401
After Hours Phone: (619) 543-7400
Provider Gender: Female
License number: G74059
NPI: 1114039062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCQUEEN, DANA B
Provider ID: 110865
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A141023
NPI: 1669768180
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEADOWS, AUDRA R

Provider ID: 285741
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MEADOWS, AUDRA R

Provider ID: 285742
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C171680
NPI: 1467585521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115031
Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Female
License number: A114181

NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

MELLENDEZ BERRIOS, IARA DEL M

Provider ID: 115034
Board Certified Specialty: No
 DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619) 515-2560
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs Inc

IPA:

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 115051

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax:

After Hours Phone: (619)

515-2424

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* P, EB, IB, E, R, T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park Family Health Centers

IPA:

MELENDEZ BERRIOS, IARA

DEL M

Provider ID: 128388

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-W,F 8:30AM-5:30PM,

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr San Diego-Beach Area

IPA:

MELENDEZ BERRIOS, IARA DEL M

Provider ID: 75971

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: A114181

NPI: 1740514249

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights Family Health Center

IPA:

MEURICE, MARIELLE ERENDIRA LUCILLE

Provider ID: 284268

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A159003

NPI: 1720510779

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: University

Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group MEURICE, MARIELLE ERENDIRA LUCILLE <i>Provider ID:</i> 284270 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A159003 <i>NPI:</i> 1720510779 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> University Hsp Of San Diego Co, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 16/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group MILLER, CHRISTINE B <i>Provider ID:</i> 64614 <i>Board Certified Specialty:</i> No	UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-5350 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Female <i>License number:</i> G82246 <i>NPI:</i> 1154346583 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> MODY, SHEILA K <i>Provider ID:</i> 64616 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-6248 <i>Fax:</i> (858) 657-8666 <i>After Hours Phone:</i> (619) 543-6248 <i>Provider Gender:</i> Female <i>License number:</i> A117818 <i>NPI:</i> 1952561102 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical	Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc MOORE, THOMAS R <i>Provider ID:</i> 64617 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-7878 <i>Fax:</i> (619) 543-5350 <i>After Hours Phone:</i> (619) 543-7878 <i>Provider Gender:</i> Male <i>License number:</i> G49930 <i>NPI:</i> 1184682379 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group MORAN, THOMAS P <i>Provider ID:</i> 270953
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 220 EUCLID AVE STE 30
 SAN DIEGO, CA 92114-3617
Phone: (619) 881-4500
Fax:
After Hours Phone: (619) 881-4500
Provider Gender: Male
License number: G59541
NPI: 1093887069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MORAN, THOMAS P

Provider ID: 48123
Board Certified Specialty: No
PLANNED PARENTHOOD OF THE PACIFIC SOUTHWEST
 2017 1ST AVE STE 100
 SAN DIEGO, CA 92101-9001
Phone: (888) 743-7526
Fax:
After Hours Phone: (888) 743-7526
Provider Gender: Male
License number: G59541
NPI: 1093887069
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 7:30AM-4PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NGUYEN, SON H

Provider ID: 271018
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1075 CAMINO DEL RIO S
 SAN DIEGO, CA 92108-3538
Phone: (619) 881-4500
Fax:
After Hours Phone: (619) 881-4500
Provider Gender: Male
License number: G63695
NPI: 1548332513
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PINSON, KELSEY A

Provider ID: 284286
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121-3814
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A158192
NPI: 1841722485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, University Hsp Of San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PINSON, KELSEY A

Provider ID: 284287
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A158192
NPI: 1841722485
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, University Hsp Of
 San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PINSON, KELSEY A
Provider ID: 284288
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A158192
NPI: 1841722485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, University Hsp Of
 San Diego Co
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
RESNIK, JAMIE L
Provider ID: 271534
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RESNIK, JAMIE L
Provider ID: 271536
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A66580

NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RESNIK, JAMIE L
Provider ID: 271537
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 6030 VILLAGE WAY
 SAN DIEGO, CA 92130-2972
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A66580
NPI: 1558310557
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A127234 NPI: 1750544516 Provider English Spoken: Yes Provider Language(s) Spoken: Indonesian, Spanish, Swahili Cultural Competency: No Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA:
RESNIK, JAMIE L Provider ID: 64633 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-6248 Fax: After Hours Phone: (619) 543-6248 Provider Gender: Female License number: A66580 NPI: 1558310557 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	RIVAS, RENEE N Provider ID: 284298 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A173043 NPI: 1295263861 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 16/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	
RIES, MAUREEN C Provider ID: 124479 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911	RIES, MAUREEN C Provider ID: 125254 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (619) 543-6248 Fax: After Hours Phone: (619) 543-6248 Provider Gender: Female License number: A127234 NPI: 1750544516 Provider English Spoken: Yes Provider Language(s) Spoken: Indonesian, Spanish, Swahili Cultural Competency: No Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd	RODRIGUEZ JEREZ,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ROBERTO D

Provider ID: 130080
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130084
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420
Fax:
After Hours Phone: (619) 515-2420
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond Neighborhoods Family Hlth Ctrs Inc
IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130085
Board Certified Specialty: No
CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619) 515-2400
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

RODRIGUEZ JEREZ, ROBERTO D

Provider ID: 130087
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (616) 515-2444
Fax:

After Hours Phone: (616) 515-2444
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-W,F 8:30AM-5:30PM,
TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-Beach Area

IPA:

RODRIGUEZ JEREZ,

ROBERTO D

Provider ID: 130088

Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Male

License number: A154298

NPI: 1710316450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Sharp Coronado Hosp
And Healthcare Ctr, Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

SANDOVAL, SELINA M

Provider ID: 270560

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A167853

NPI: 1336599653

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SCHWENDEMANN, WADE D

Provider ID: 122023

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)

966-6710

Provider Gender: Male

License number: A109228

NPI: 1477563302

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Memorial Hospital,

Grossmont Hospital, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

Sharp Grossmont Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SEFA-BOAKYE, KOFI D

Provider ID: 205413

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

286 EUCLID AVE STE 205

SAN DIEGO, CA 92114-3612

Phone: (619) 263-6141

Fax: (619) 263-7236

After Hours Phone: (619)

263-6141

Provider Gender: Male

License number: G59670

NPI: 1902993660

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Sharp Chula

Vista Med Ctr, Sharp Coronado

Hosp And Healthcare Ctr,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SEMO, ROBERT J

Provider ID: 64642

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (619) 543-7878

Fax: (619) 543-5350

After Hours Phone: (619)
543-7878

Provider Gender: Male

License number: A42951

NPI: 1326030669

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SHAH, NEMI M

Provider ID: 272580

Board Certified Specialty: No
UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A168801

NPI: 1558715268

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SUTTON, ALICE C

Provider ID: 121249

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A146708

NPI: 1669815437

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SUYAMA, JULIE A

Provider ID: 284290

Board Certified Specialty: No
UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 360

SAN DIEGO, CA 92121-3020

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A172670

NPI: 1306372800

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

SUYAMA, JULIE A

Provider ID: 284291
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A172670
NPI: 1306372800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMAS, STEVEN J

Provider ID: 64221
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6600
Fax: (619) 543-5767
After Hours Phone: (619)
543-6600

Provider Gender: Male
License number: A40379
NPI: 1639242589
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Encinitas, Palomar Medical
Center, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMSON, SAMANTHA L

Provider ID: 285174
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A149038
NPI: 1689013468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

THOMSON, SAMANTHA L

Provider ID: 285176
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A149038
NPI: 1689013468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Cedars Sinai
Medical Center, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TILFORD, SARAH A

Provider ID: 126503

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax:
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: A154086
NPI: 1194139766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TITH, TEVY

Provider ID: 73303
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: A103521
NPI: 1588816086
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns, University Of California Irvine Med Ctr, Sharp Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VARON, SHIRA

Provider ID: 64662
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-7878
Fax: (619) 543-5350
After Hours Phone: (619) 543-7878
Provider Gender: Female
License number: A96901
NPI: 1619047545
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WASHINGTON, SIERRA L

Provider ID: 124298
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6777
Fax:
After Hours Phone: (619) 543-6777
Provider Gender: Female
License number: A99781
NPI: 1386845162
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Portuguese, Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Medical Ctr At Ucsf
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEBER, AKILAH F

Provider ID: 77792
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN**

7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)

966-7484

Provider Gender: Female

License number: C56035

NPI: 1760652713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Childrens Hosp And
Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WEBER, AKILAH F

Provider ID: 84961

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax: (858) 657-8666

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: C56035

NPI: 1760652713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Childrens Hosp And
Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WILLIAMS, KRISTIN M

Provider ID: 121983

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

7910 FROST ST STE 430

SAN DIEGO, CA 92123-2795

Phone: (858) 966-6710

Fax:

After Hours Phone: (858)

966-6710

Provider Gender: Female

License number: A72985

NPI: 1992847131

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Stanford
Health Care, Lucile Salter

Packard Childrens Hosp, San
Mateo Medical Ctr, Sharp

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Tri City Medical Ctr,

California Pacific Med Ctr, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

WINESBURG, JENNIFER J

Provider ID: 113743

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Desert

Regional Med Ctr, Sharp
Coronado Hosp And Healthcare

Ctr, Grossmont Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

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D. Directorio de proveedores de atención especializada

Family Health Center

IPA:

WINESBURG, JENNIFER J

Provider ID: 114803

Board Certified Specialty: No

CITY HEIGHTS FAMILY

HEALTH CENTERS INC

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont

Hospital, Desert Regional Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): City Heights

Family Health Centers Inc

IPA:

WINESBURG, JENNIFER J

Provider ID: 114804

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2420

Fax:

After Hours Phone: (619)

515-2420

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont

Hospital, Desert Regional Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Diamond

Neighborhoods Family Hlth Ctrs

Inc

IPA:

WINESBURG, JENNIFER J

Provider ID: 114812

Board Certified Specialty: No

NORTH PARK FAMILY HEALTH

CENTERS

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2400

Fax:

After Hours Phone: (619)

515-2400

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont

Hospital, Desert Regional Med

Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

T, ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): North Park

Family Health Centers

IPA:

WINESBURG, JENNIFER J

Provider ID: 128427

Board Certified Specialty: No

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2444

Fax:

After Hours Phone: (619)

515-2444

Provider Gender: Female

License number: 20A11535

NPI: 1811162456

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Desert

Regional Med Ctr, Sharp

Coronado Hosp And Healthcare

Ctr, Grossmont Hospital, Scripps

Mercy Hospital

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-W,F 8:30AM-5:30PM,

TH 9AM-6PM, SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Family Hlth Ctr

San Diego-Beach Area

IPA:

WITTGROVE, PERRI LYNNE L

Provider ID: 282743

Board Certified Specialty: No

UCSD MEDICAL GROUP

3750 CONVOY ST STE 312

SAN DIEGO, CA 92111-3741

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: G56550

NPI: 1497752836

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Alvarado

Hospital Llc, Grossmont Hospital,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

WITTGROVE, PERRI LYNNE L

Provider ID: 282744

Board Certified Specialty: No

UCSD MEDICAL GROUP

6719 ALVARADO RD STE 302

SAN DIEGO, CA 92120-5263

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: G56550

NPI: 1497752836

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Alvarado

Hospital Llc, Grossmont Hospital,

Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ZHOU, BETH B

Provider ID: 240067

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A162098

NPI: 1558748186

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 16/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ZIEG, ALAN J

Provider ID: 114822

Board Certified Specialty: No

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2560

Fax:

After Hours Phone: (619)

515-2560

Provider Gender: Male

License number: G78814

NPI: 1699790634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital,

Sharp Coronado Hosp And

Healthcare Ctr, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: P, EB, IB, E, R,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond
Neighborhoods Family Hlth Ctrs
Inc
IPA:

ZIEG, ALAN J

Provider ID: 25639
Board Certified Specialty: No
CITY HEIGHTS FAMILY
HEALTH CENTERS INC
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2400
Fax:
After Hours Phone: (619)
515-2400
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights
Family Health Centers Inc
IPA:

ZIEG, ALAN J

Provider ID: 25640
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

ZIEG, ALAN J

Provider ID: 25642
Board Certified Specialty: No
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Provider Gender: Male

License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park
Family Health Centers
IPA:

ZIEG, ALAN J

Provider ID: 25642
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH
CENTERS
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619)
515-2424
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

ZIEG, ALAN J

Provider ID: 46812
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr

San Diego-Beach Area
IPA:

ONCOLOGY MEDICAL

FLORES, EDNA I

Provider ID: 115370
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: A114373
NPI: 1396994604
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FRAKES, LAURIE A , MD

Provider ID: 241857
Board Certified Specialty: No

COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M

Provider ID: 68222
Board Certified Specialty: No
CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G28164
NPI: 1699721035
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL J
Provider ID: 214188
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Male
License number: A124825
NPI: 1760776728
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: No
Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri Network
 City Medical Ctr, Scripps
 Memorial Hospital, Scripps
 Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMS, MONA N
Provider ID: 260960
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3750 CONVOY ST # 1
SAN DIEGO, CA 92111-3738
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ADAMS, MONA N
Provider ID: 260963
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: OPT14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

AFSHARI, NATALIE A
Provider ID: 63769
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: C51849

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1538126735
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BANSAL, PREETI

Provider ID: 205620
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
 Provider Gender: Female
 License number: A90890
 NPI: 1871664631
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BAXTER, SALLY L

Provider ID: 272788
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4060 4TH AVE STE 610
 SAN DIEGO, CA 92103-2144
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A140952
 NPI: 1912325184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BAXTER, SALLY L

Provider ID: 272789
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # 101
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A140952
 NPI: 1912325184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BEAZER, ALEX P

Provider ID: 272803
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A169030
 NPI: 1942662168
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BHATIA, SHAGUN K

Provider ID: 240636
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BINDER, NICHOLAS R , MD

Provider ID: 268751
Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BINDER, NICHOLAS R , MD

Provider ID: 268755
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BOKOSKY, JOHN E

Provider ID: 206066
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 3939 3RD AVE
 SAN DIEGO, CA 92103-3002
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

BOKOSKY, JOHN E

Provider ID: 26909
Board Certified Specialty: No
EYE CARE OF SAN DIEGO MED OFFICE
3939 3RD AVE
SAN DIEGO, CA 92103-3002
Phone: (619) 296-8525
Fax: (619) 291-6577
After Hours Phone: (619) 296-8525
Provider Gender: Male
License number: G51651
NPI: 1245215748
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BREIDENSTEIN, BRENDA G

Provider ID: 63817
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A121728
NPI: 1518118124
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BRUMMEL, KIRSTA L

Provider ID: 240635
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A11590
NPI: 1003085481
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ronald Reagan Ucla Med Ctr, Santa Monica Ucla Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAMP, ANDREW S

Provider ID: 260020
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Male
License number: A142062
NPI: 1326300377
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHANG, TOM S , MD

Provider ID: 270361

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken: Cantonese
Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, Providence Little Co Of Mary Med Ctr Torrance, Methodist Hosp Of Southern California, Hollywood Presbyterian Med Ctr, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOPLIN, NEIL T

Provider ID: 49233
Board Certified Specialty: No
EYE CARE OF SAN DIEGO MED OFFICE
 3939 3RD AVE
 SAN DIEGO, CA 92103-3002
Phone: (619) 765-2737
Fax: (619) 291-6577
After Hours Phone: (619) 765-2737
Provider Gender: Male

License number: G57042
NPI: 1144205642
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DORAIRAJ, SYRIL K

Provider ID: 63879
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A115934
NPI: 1295992550
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

EZON, ISAAC C

Provider ID: 63897
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A120923
NPI: 1801057781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FERREYRA, HENRY A

Provider ID: 63906
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A77921
 NPI: 1669497822
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Doctors Medical Center, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GARFF, KEVIN

Provider ID: 239606
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A160988
 NPI: 1609258920
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GOLDBERG, JEFFREY L

Provider ID: 83515
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A124021
 NPI: 1417158114
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Stanford Health Care, Lucile Salter Packard Childrens Hosp
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GRANET, DAVID B

Provider ID: 64567
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248
 Fax:
 After Hours Phone: (619) 543-6248
 Provider Gender: Male
 License number: G77597
 NPI: 1982629036
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-F 8AM-5PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GUALTIERI, CHRISTOPHER J , MD

Provider ID: 252313
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 3969 4TH AVE STE 300
 SAN DIEGO, CA 92103-3165
 Phone: (619) 688-2648
 Fax: (619) 688-2626
 After Hours Phone: (619) 688-2648
 Provider Gender: Male
 License number: G73020
 NPI: 1790769156
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HUANG, ALEX A

Provider ID: 63968

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A111999

NPI: 1821246141

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin

Cultural Competency: No

Hospital Affiliation: Huntington

Memorial Hospital, Ronald

Reagan UCLA Med Ctr, Ucsd

Medical Ctr, Lac Usc Medical

Center, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

HUYNH, PAUL D , MD

Provider ID: 245199

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ STE 100

SAN DIEGO, CA 92126-2370

Phone: (858) 549-3200

Fax: (858) 752-4383

After Hours Phone: (858)

549-3200

Provider Gender: Male

License number: A79141

NPI: 1871577056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HUYNH, PAUL D , MD

Provider ID: 245200

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105-8021

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)

283-1303

Provider Gender: Male

License number: A79141

NPI: 1871577056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

T, W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

HUYNH, PAUL D

Provider ID: 40045

Board Certified Specialty: No

ADVANCED EYE LASER CTR

OF CA INC

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105-8021

Phone: (619) 283-1303

Fax:

After Hours Phone: (619)

283-1303

Provider Gender: Male

License number: A79141

NPI: 1871577056

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, E, R,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

T, W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	7695 CARDINAL CT STE 100 SAN DIEGO, CA 92123-3357 Phone: (858) 609-7100 Fax: (858) 609-7106 After Hours Phone: (858) 609-7100 Provider Gender: Male License number: A92495 NPI: 1194905711 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi, Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Ronald Reagan Ucla Med Ctr, Scripps Mercy Hospital, Tri City Medical Ctr, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Alvarado Hosp Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hospital Llc, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
HUYNH, PAUL D Provider ID: 40046 Board Certified Specialty: No ADVANCED EYE LASER CTR OF CA INC 10737 CAMINO RUIZ STE 100 SAN DIEGO, CA 92126-2370 Phone: (858) 549-3200 Fax: (858) 549-3207 After Hours Phone: (858) 549-3200 Provider Gender: Male License number: A79141 NPI: 1871577056 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Scripps Memorial Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	KATZMAN, BARRY, MD Provider ID: 247366 Board Certified Specialty: Yes COMMUNITY CARE IPA LLC 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A34834 NPI: 1760473797 Provider English Spoken: Yes	KATZMAN, BARRY Provider ID: 262422 Board Certified Specialty: Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 Phone: (800) 898-2020 Fax: (844) 897-3788 After Hours Phone: (800) 898-2020 Provider Gender: Male License number: A34834 NPI: 1760473797 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese Cultural Competency: No Hospital Affiliation: Alvarado Hosp Med Ctr, Sharp Memorial Hospital, Paradise Valley Hospital, Alvarado Hospital Llc, Grossmont Hospital Medi-Cal Open Panel: Yes
JAIN, ATUL K Provider ID: 206150 Board Certified Specialty: Yes RADY CHILDRENS HEALTH NETWORK		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KIKKAWA, DON O

Provider ID: 64004
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G65447
 NPI: 1932202371
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KLING, LANNING B

Provider ID: 239915
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 4060 4TH AVE STE 610
 SAN DIEGO, CA 92103-2144
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G31557
 NPI: 1841227477
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KORN, BOBBY S

Provider ID: 64015
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A81749
 NPI: 1174551006
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LEE, JEFFREY E

Provider ID: 64032
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A97291
 NPI: 1801943279
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Yue Chinese
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LIU, XIONGFEI

Provider ID: 239817
 Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A144438
NPI: 1497135156
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese, Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Mercy General
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LIU, YUNXIANG
Provider ID: 210803
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax:
After Hours Phone: (858)
309-7702
Provider Gender: Female
License number: A129713
NPI: 1770849804
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

LI, ALEXANDRIA L
Provider ID: 272833
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A168107
NPI: 1841652864
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Ucsd Medical Group
MCGRAW, JOSEPH P , MD
Provider ID: 269702
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 465-5526
After Hours Phone: (619)
697-4600
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCGRAW, JOSEPH P , MD
Provider ID: 269704
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MILLER, DOUGLAS G

Provider ID: 262442
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax:
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical

Group-Sd

MILLER, DOUGLAS G

Provider ID: 262443
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax:
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 99211
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax:
After Hours Phone: (619) 697-4600

Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MILLER, DOUGLAS G , MD

Provider ID: 99220
Board Certified Specialty: No
 WEST COAST EYE CARE ASSOCS MED GRP
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax:
After Hours Phone: (858) 565-8822
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MOAYEDPARDAZI, HAMIDEH S

Provider ID: 99620
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-9163
Fax:
After Hours Phone: (619)
471-9163
Provider Gender: Female
License number: A137200
NPI: 1386933240
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Monterey
Park Hospital, Monterey Park
Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOLL, ANGELA M

Provider ID: 205510
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858)
309-7702
Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp
Memorial Hospital, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MOLL, ANGELA M

Provider ID: 52616
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax:
After Hours Phone: (858)
309-7702
Provider Gender: Female

License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Grossmont Hospital, Sharp
Memorial Hospital, Childrens
Hosp And Resrch Ctr At
Oakland, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MORRISON-REYES, JOSHUA A

Provider ID: 107891
Board Certified Specialty: No
RETINA INSTITUTE OF CA
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619)
697-4600
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Memorial

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D. Directorio de proveedores de atención especializada

Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MED OFFICE 3939 3RD AVE SAN DIEGO, CA 92103-3002 <i>Phone:</i> (800) 765-2737 <i>Fax:</i> (619) 692-6228 <i>After Hours Phone:</i> (800) 765-2737 <i>Provider Gender:</i> Male <i>License number:</i> G68919 <i>NPI:</i> 1780669283 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:
MORRISON-REYES, JOSHUA A <i>Provider ID:</i> 107920 <i>Board Certified Specialty:</i> No WEST COAST EYE CARE ASSOCS MED GRP 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (858) 565-8822 <i>Fax:</i> (858) 565-2449 <i>After Hours Phone:</i> (858) 565-8822 <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	MORRISON-REYES, JOSHUA A , MD <i>Provider ID:</i> 269178 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> (619) 464-5526 <i>After Hours Phone:</i> (619) 697-4600 <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Memorial Hospital, Sharp Memorial Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MOVAGHAR, MANSOOR <i>Provider ID:</i> 216412 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 200 SAN DIEGO, CA 92123-2776 <i>Phone:</i> (858) 309-7702 <i>Fax:</i> <i>After Hours Phone:</i> (858) 309-7702 <i>Provider Gender:</i> Male <i>License number:</i> A100897 <i>NPI:</i> 1497792220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
MORTON, ASA D <i>Provider ID:</i> 44922 <i>Board Certified Specialty:</i> No EYE CARE OF SAN DIEGO	MORTON, ASA D <i>Provider ID:</i> 44922 <i>Board Certified Specialty:</i> No EYE CARE OF SAN DIEGO	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

NAJAFI, DAVID J

Provider ID: 25719
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Provider Gender: Male
License number: A68124
NPI: 1396715991
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Sharp
 Memorial Hospital, Grossmont
 Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:

Medical Group(s): Logan Heights
 Family Health Center
IPA:

NG, DIANA

Provider ID: 270011
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 10737 CAMINO RUIZ STE 100
 SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200
Fax:
After Hours Phone: (858)
 549-3200
Provider Gender: Female
License number: A115695
NPI: 1710112941
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Yue Chinese
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NUDLEMAN, ERIC D

Provider ID: 205860
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3750 CONVOY ST STE 301
 SAN DIEGO, CA 92111-3741
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858)
 309-7702

Provider Gender: Male
License number: A131592
NPI: 1154582575
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

NUDLEMAN, ERIC D

Provider ID: 94672
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3750 CONVOY ST STE 301
 SAN DIEGO, CA 92111-3741
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858)
 309-7702
Provider Gender: Male
License number: A131592
NPI: 1154582575
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OBRIEN, CHRISTOPHER P

Provider ID: 84307
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A116707
 NPI: 1629263421
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

OHALLORAN, HENRY S

Provider ID: 205888
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax: (858) 966-7403
 After Hours Phone: (858) 309-7702
 Provider Gender: Male
 License number: A73282
 NPI: 1235287947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OHALLORAN, HENRY S

Provider ID: 52619
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
 Phone: (858) 309-7702
 Fax:
 After Hours Phone: (858) 309-7702
 Provider Gender: Male
 License number: A73282
 NPI: 1235287947
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

OZZELLO, DANIEL J

Provider ID: 241984
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A161485
 NPI: 1073992731
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

PANSARA, MEGHA L

Provider ID: 277166
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: A143429
NPI: 1184983728
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PANSARA, MEGHA L

Provider ID: 286602
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
License number: A143429
NPI: 1184983728
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PATEL, GITANE

Provider ID: 262316
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No

Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PATEL, GITANE

Provider ID: 262321
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Gujarati, Spanish, Tagalog, Vietnamese
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Paradise Valley Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, GITANE, MD

Provider ID: 268738

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,
Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Paradise Valley
Hospital, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, GITANE, MD

Provider ID: 268743

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Gujarati, Spanish,
Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Grossmont
Hospital, Paradise Valley
Hospital, Scripps Memorial
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, SARJAN H

Provider ID: 262402

Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,
Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc, Grossmont Hospital,
Scripps Memorial Hospital,
Paradise Valley Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

PATEL, SARJAN H

Provider ID: 262405

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish,
Tagalog, Vietnamese

Cultural Competency: No

Hospital Affiliation: Alvarado

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd PATEL, SARJAN H , MD <i>Provider ID:</i> 268798 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 697-4600 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	COMMUNITY CARE IPA LLC 10737 CAMINO RUIZ SAN DIEGO, CA 92126-2359 <i>Phone:</i> (858) 549-3200 <i>Fax:</i> (858) 549-3207 <i>After Hours Phone:</i> (858) 549-3200 <i>Provider Gender:</i> Male <i>License number:</i> A168006 <i>NPI:</i> 1588027213 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
PATEL, SARJAN H , MD <i>Provider ID:</i> 268798 <i>Board Certified Specialty:</i> Yes COMMUNITY CARE IPA LLC 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (619) 697-4600 <i>Fax:</i> (619) 697-2410 <i>After Hours Phone:</i> (619) 697-4600 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	PATEL, SARJAN H , MD <i>Provider ID:</i> 268801 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Male <i>License number:</i> A114976 <i>NPI:</i> 1316199326 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Hindi, Spanish, Tagalog, Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Grossmont Hospital, Scripps Memorial Hospital, Paradise Valley Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	PRABHU, SUJATA P <i>Provider ID:</i> 262389 <i>Board Certified Specialty:</i> Yes IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 6945 EL CAJON BLVD SAN DIEGO, CA 92115-1754 <i>Phone:</i> (800) 898-2020 <i>Fax:</i> (844) 897-3788 <i>After Hours Phone:</i> (800) 898-2020 <i>Provider Gender:</i> Female <i>License number:</i> A115965 <i>NPI:</i> 1982872552 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
PHAN, RYAN <i>Provider ID:</i> 287883 <i>Board Certified Specialty:</i> No	PHAN, RYAN <i>Provider ID:</i> 287883 <i>Board Certified Specialty:</i> No	

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D. Directorio de proveedores de atención especializada

Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P

Provider ID: 262392
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268916
Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

PRABHU, SUJATA P , MD

Provider ID: 268919
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog, Telugu, Vietnamese
Cultural Competency: No
Hospital Affiliation: Paradise Valley Hospital, Alvarado Community Hospital, Scripps Memorial Hospital, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ROBINSON, FANE L

Provider ID: 206038
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123-3357

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858)
609-7100

Provider Gender: Male

License number: A45990

NPI: 1295894368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ROBINSON, FANE L

Provider ID: 26659

Board Certified Specialty: No

SAN DIEGO RETINA

ASSOCIATES A MED CORP

7695 CARDINAL CT STE 100

SAN DIEGO, CA 92123-3357

Phone: (858) 609-7100

Fax:

After Hours Phone: (858)

609-7100

Provider Gender: Male

License number: A45990

NPI: 1295894368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans, Spanish

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website: sdretina.com

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

SAID, BISHOY

Provider ID: 64170

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A110408

NPI: 1861649238

Provider English Spoken: Yes

Provider Language(s) Spoken:

Arabic, Spanish

Cultural Competency: No

Hospital Affiliation: Palomar

Medical Center, Pomerado

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SATO, MICHELLE A

Provider ID: 84772

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 543-3000

Fax:

After Hours Phone: (800)

543-3000

Provider Gender: Female

License number: A125720

NPI: 1225326580

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SCHER, COLIN A

Provider ID: 206329

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

7910 FROST ST STE 200

SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)

576-1700

Provider Gender: Male

License number: A42700

NPI: 1396816153

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center, Grossmont Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHER, COLIN A

Provider ID: 52622
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax:
After Hours Phone: (858) 309-7702
Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Palomar Medical Center, Grossmont Hospital, Tri City Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SHAW, BLAKE R

Provider ID: 40204
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: G61394
NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

SHAW, BLAKE R

Provider ID: 40204

Board Certified Specialty: No
 SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: G61394
NPI: 1649206541
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

SLIGHT, JOHN R

Provider ID: 64205
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: C25107
NPI: 1306971239
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITH, MARK D

Provider ID: 206136
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7695 CARDINAL CT STE 100
 SAN DIEGO, CA 92123-3357
Phone: (858) 609-7100
Fax: (858) 609-7106
After Hours Phone: (858) 609-7100
Provider Gender: Male
License number: G55641
NPI: 1255490330
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SMITH, MARK D

Provider ID: 48364
Board Certified Specialty: No
 SAN DIEGO RETINA ASSOCIATES A MED CORP
 7695 CARDINAL CT STE 100
 SAN DIEGO, CA 92123-3357
Phone: (858) 609-7100
Fax: (858) 609-7106
After Hours Phone: (858) 609-7100
Provider Gender: Male
License number: G55641
NPI: 1255490330
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Tri City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: sdretina.com
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

TSAI, FRANK F

Provider ID: 92169
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: A130661
NPI: 1043530777
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TUNG, JONATHAN D

Provider ID: 64232
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A110281
NPI: 1649505744
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:

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D. Directorio de proveedores de atención especializada

<i>Email:</i>	<i>Phone:</i> (619) 543-6222	<i>Min/Max Age:</i> 0/999
<i>Medical Group(s):</i>	<i>Fax:</i>	<i>American Sign Language (ASL):</i>
<i>IPA:</i>	<i>After Hours Phone:</i> (619) 543-6222	No
WAINESS, REID M , MD	<i>Provider Gender:</i> Male	<i>Accessibility:</i>
<i>Provider ID:</i> 254762	<i>License number:</i> A136483	<i>Hours:</i> M-SA 9AM-5PM
<i>Board Certified Specialty:</i> No	<i>NPI:</i> 1790078129	<i>Website:</i>
COMMUNITY CARE IPA LLC	<i>Provider English Spoken:</i> Yes	<i>Email:</i>
4344 CONVOY ST STE C2	<i>Provider Language(s) Spoken:</i>	<i>Medical Group(s):</i>
SAN DIEGO, CA 92111-3737	Mandarin	<i>IPA:</i> Ucsd Medical Group
<i>Phone:</i> (800) 898-2020	<i>Cultural Competency:</i> No	
<i>Fax:</i>	<i>Hospital Affiliation:</i> Ucsd La Jolla	YAMAGATA, ASMANEH S
<i>After Hours Phone:</i> (800) 898-2020	John Sally Thornton, Ucsd	<i>Provider ID:</i> 84254
<i>Provider Gender:</i> Male	Medical Ctr	<i>Board Certified Specialty:</i> No
<i>License number:</i> A108766	<i>Medi-Cal Open Panel:</i> No	UCSD MEDICAL GROUP
<i>NPI:</i> 1396935979	<i>Min/Max Age:</i> None	200 W ARBOR DR
<i>Provider English Spoken:</i> Yes	<i>American Sign Language (ASL):</i>	SAN DIEGO, CA 92103-1911
<i>Provider Language(s) Spoken:</i>	No	<i>Phone:</i> (619) 543-6222
Armenian, Cantonese, Hebrew,	<i>Accessibility:</i> W	<i>Fax:</i>
Korean, Mandarin, Spanish,	<i>Hours:</i> M-SA 9AM-5PM	<i>After Hours Phone:</i> (619) 543-6222
Vietnamese	<i>Website:</i>	<i>Provider Gender:</i> Female
<i>Cultural Competency:</i> No	<i>Email:</i>	<i>License number:</i> A124917
<i>Hospital Affiliation:</i> San Gabriel	<i>Medical Group(s):</i>	<i>NPI:</i> 1174754022
Valley Med Ctr, Desert Regional	<i>IPA:</i>	<i>Provider English Spoken:</i> Yes
Med Ctr	WU, CHRIS Y	<i>Provider Language(s) Spoken:</i>
<i>Medi-Cal Open Panel:</i> Yes	<i>Provider ID:</i> 239583	Farsi, French
<i>Min/Max Age:</i> 5/99	<i>Board Certified Specialty:</i> No	<i>Cultural Competency:</i> No
<i>American Sign Language (ASL):</i>	UCSD MEDICAL GROUP	<i>Hospital Affiliation:</i>
No	200 W ARBOR DR	<i>Medi-Cal Open Panel:</i> No
<i>Accessibility:</i>	SAN DIEGO, CA 92103-1911	<i>Min/Max Age:</i> None
<i>Hours:</i> M-SA 9AM-5PM	<i>Phone:</i> (800) 926-8273	<i>American Sign Language (ASL):</i>
<i>Website:</i>	<i>Fax:</i>	No
<i>Email:</i>	<i>After Hours Phone:</i> (800) 926-8273	<i>Accessibility:</i> W
<i>Medical Group(s):</i>	<i>Provider Gender:</i> Male	<i>Hours:</i> M-SA 9AM-5PM
<i>IPA:</i> Community Care Ipa Llc	<i>License number:</i> A161633	<i>Website:</i>
	<i>NPI:</i> 1265829345	<i>Email:</i>
WANG, AARON S	<i>Provider English Spoken:</i> Yes	<i>Medical Group(s):</i>
<i>Provider ID:</i> 101347	<i>Provider Language(s) Spoken:</i>	<i>IPA:</i>
<i>Board Certified Specialty:</i> No	<i>Cultural Competency:</i> No	
UCSD MEDICAL GROUP	<i>Hospital Affiliation:</i> Ucsd Medical	ZABANEH, ALEXANDER I
200 W ARBOR DR	Ctr, Ucsd La Jolla John Sally	<i>Provider ID:</i> 262171
SAN DIEGO, CA 92103-1911	Thornton	<i>Board Certified Specialty:</i> No
	<i>Medi-Cal Open Panel:</i> Yes	IMPERIAL HEALTH HOLDINGS
		MEDICAL GROUP-SD
		4344 CONVOY ST STE C2

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92111-3737
Phone: (760) 564-2500
Fax: (858) 565-2449
After Hours Phone: (760) 564-2500

Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZABANEH, ALEXANDER I , MD
Provider ID: 269122
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 464-5526
After Hours Phone: (619) 697-4600
Provider Gender: Male
License number: A154697
NPI: 1346687233
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

ZHU, FEILIN A
Provider ID: 99924
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A135422
NPI: 1497045041
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:

ORAL MAXILLOFACIAL SURGEON

BERGER, JOEL S
Provider ID: 205659
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8008 FROST ST STE 311
SAN DIEGO, CA 92123-4288
Phone: (858) 292-5175
Fax: (858) 292-0305
After Hours Phone: (858) 292-5175
Provider Gender: Male
License number: G45427
NPI: 1841218229
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DENTICO-OLIN, MARC
Provider ID: 273663
Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
501 WASHINGTON ST STE 710
SAN DIEGO, CA 92103-2231
Phone: (619) 295-6774
Fax: (619) 295-6776
After Hours Phone: (619) 295-6774

Provider Gender: Male
License number: A143794
NPI: 1629205174
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Green Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

OSTEOPATHIC MANIPULATIVE THERAPY

PORTERA, ARIEL M
Provider ID: 273321
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A16832

NPI: 1841721784
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OTOLARYNGOLOGY / OTOLOGY / LARYNGOLOGY / RHINOLOGY

BLISS, MORGAN R
Provider ID: 272565
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A134647
NPI: 1760707657
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BRIGGER, MATTHEW T
Provider ID: 272564
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
License number: C55473
NPI: 1952490807

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KARI, ELINA
Provider ID: 272524
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

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D. Directorio de proveedores de atención especializada

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A116411
NPI: 1780860536
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Pih Health
Hospital - Whittier, Keck Hospital
Of Usc, Usc Kenneth Norris Jr
Cancer Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MAGIT, ANTHONY E

Provider ID: 272767
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (855) 309-7701
Fax: (858) 966-4062
After Hours Phone: (855) 309-7701
Provider Gender: Male
License number: G71859

NPI: 1891858379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

NATION, JAVAN J

Provider ID: 272558
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
License number: A125279
NPI: 1043478902
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Childrens Hosp And Resrch Ctr
At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

OTOLARYNGOLOGY

BRUMUND, KEVIN T

Provider ID: 41180
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: A91099
NPI: 1033193669
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CALIFANO, JOSEPH A

Provider ID: 112511
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (858) 657-8590

Fax:

After Hours Phone: (858)
657-8590

Provider Gender: Male

License number: G138926

NPI: 1881652972

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

CARVALHO, DANIELA

Provider ID: 205628

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
109

SAN DIEGO, CA 92123-4226

Phone: (858) 309-7702

Fax:

After Hours Phone: (858)
309-7702

Provider Gender: Female

License number: A94239

NPI: 1154492916

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Sharp Memorial Hospital, Scripps
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

License number: A94239

NPI: 1154492916

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Scripps Memorial Hospital, Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

FRIEDMAN, RICK A

Provider ID: 121290

Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 657-8590

Fax:

After Hours Phone: (858)
657-8590

Provider Gender: Male

License number: G67571

NPI: 1982708558

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Good

Samaritan Hospital Los Angeles,
Childrens Hosp Of Los Angeles,
South Coast Global Medical
Center Inc, Anaheim Global
Medical Center, Orange County

Global Medical Center Inc,
Chapman Global Medical Center
Inc, Ucsd La Jolla John Sally
Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FRIESEN, TZYYNONG L

Provider ID: 272604

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 309-7701
 Fax: (858) 966-8038
 After Hours Phone: (858) 309-7701
 Provider Gender: Female
 License number: A152327
 NPI: 1952740177
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

GAUDREAU, PHILIP A

Provider ID: 272556
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
 Phone: (858) 309-7701
 Fax: (858) 966-8038
 After Hours Phone: (858) 309-7701
 Provider Gender: Male
 License number: A149585
 NPI: 1326207077
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego,
 Naval Hsp Camp Pendleton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

GILANI, SAPIDEH

Provider ID: 112447
 Board Certified Specialty: Yes
 UCSD OTOLARYNGOLOGY
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (858) 657-8590
 Fax:
 After Hours Phone: (858) 657-8590
 Provider Gender: Female
 License number: G80720
 NPI: 1003825571
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GREENE, JACQUELINE J

Provider ID: 272959
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A161242
 NPI: 1144583931
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

JIANG, WEN A

Provider ID: 272660
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
 Phone: (858) 309-7701
 Fax: (858) 966-8038
 After Hours Phone: (858) 309-7701
 Provider Gender: Female
 License number: A99198
 NPI: 1659305753
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Mandarin
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Board Certified Specialty:</i> No UCSD OTOLARYNGOLOGY 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (858) 657-8590 <i>Fax:</i> <i>After Hours Phone:</i> (858) 657-8590 <i>Provider Gender:</i> Female <i>License number:</i> A78948 <i>NPI:</i> 1477524452 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Vietnamese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Health Care, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
LEUIN, SHELBY C <i>Provider ID:</i> 272637 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 309-7701 <i>Fax:</i> (858) 966-8038 <i>After Hours Phone:</i> (858) 309-7701 <i>Provider Gender:</i> Female <i>License number:</i> A112930 <i>NPI:</i> 1124230909 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	OROSCO, RYAN K <i>Provider ID:</i> 119637 <i>Board Certified Specialty:</i> No UCSD OTOLARYNGOLOGY 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6631 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6631 <i>Provider Gender:</i> Male <i>License number:</i> A120515 <i>NPI:</i> 1427290279 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Stanford	RIEDLER, KIERSTEN L , MD <i>Provider ID:</i> 256203 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 5405 OBERLIN DR SAN DIEGO, CA 92121-1700 <i>Phone:</i> (858) 909-0770 <i>Fax:</i> (858) 909-0880 <i>After Hours Phone:</i> (858) 909-0770 <i>Provider Gender:</i> Female <i>License number:</i> A135480 <i>NPI:</i> 1437536216 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Sutter Roseville Medical Center, Mercy General Hospital, Sharp Memorial Hospital, Temecula Valley Hospital Inc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>
NGUYEN, QUYEN T <i>Provider ID:</i> 64110		

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WOO, LINDA N

Provider ID: 118801
Board Certified Specialty: No
UCSD OTOLARYNGOLOGY
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858)
657-8590
Provider Gender: Female
License number: A121814
NPI: 1467720656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

PATHOLOGY ANATOMIC

DATNOW, BRIAN

Provider ID: 275737
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A31095
NPI: 1609832633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Ucsd Medical Ctr, Ucsd
La Jolla John Sally Thornton,
Scripps Mercy Hospital Chula
Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FADARE, OLUWOLE

Provider ID: 275705
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-5764
Fax: (619) 543-5249
After Hours Phone: (619)
543-5764
Provider Gender: Male
License number: C131462
NPI: 1619955804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HANSEN, LAWRENCE A

Provider ID: 275767
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-5764
Fax:
After Hours Phone: (619)
543-5764
Provider Gender: Male
License number: G62538
NPI: 1760407498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARAST, MANA M

Provider ID: 275888
Board Certified Specialty: No
UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A102496
NPI: 1629163100
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POWELL, HENRY C

Provider ID: 275778
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A25597
NPI: 1295778348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VALASEK, MARK A

Provider ID: 275836
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A127165
NPI: 1588808448
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WONG, RICHARD L

Provider ID: 243202
Board Certified Specialty: No
UCSD MEDICAL GROUP

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A136239
NPI: 1275084295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL J

Provider ID: 247601
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G48254
NPI: 1174679849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr, El Centro Regional
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KELNER, MICHAEL J

Provider ID: 247602
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G48254
NPI: 1174679849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE DZUNG, THE

Provider ID: 247599
Board Certified Specialty: No

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G71291
NPI: 1770526931
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE DZUNG, THE

Provider ID: 247600
Board Certified Specialty: No
UCSD MEDICAL GROUP
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121-1504
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: G71291
NPI: 1770526931
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDIATRIC ALLERGY / IMMUNOLOGY

COHEN, GARY A

Provider ID: 206021
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH
NETWORK
9833 PACIFIC HEIGHTS BLVD
STE J
SAN DIEGO, CA 92121-4707
Phone: (858) 458-0940
Fax: (858) 458-3688
After Hours Phone: (858)
458-0940
Provider Gender: Male
License number: G43070
NPI: 1346424462
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Rady Childrens Hospital San
Diego, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	NETWORK 5776 RUFFIN RD SAN DIEGO, CA 92123-1013 <i>Phone:</i> (858) 292-1144 <i>Fax:</i> (858) 268-5145 <i>After Hours Phone:</i> (858) 292-1144 <i>Provider Gender:</i> Male <i>License number:</i> A121364 <i>NPI:</i> 1356570758 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No	<i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No
COLLINS, CATHLEEN A <i>Provider ID:</i> 206083 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY # 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-5961 <i>Fax:</i> (858) 966-6791 <i>After Hours Phone:</i> (858) 966-5961 <i>Provider Gender:</i> Female <i>License number:</i> A122537 <i>NPI:</i> 1205128089 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Lucile Salter Packard Childrens Hosp, Stanford Health Care <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	GENG, BOB <i>Provider ID:</i> 205824 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY # 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-5961 <i>Fax:</i> (858) 966-6791 <i>After Hours Phone:</i> (858) 966-5961 <i>Provider Gender:</i> Male <i>License number:</i> A121364 <i>NPI:</i> 1356570758 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	GREINER, ALEXANDER N <i>Provider ID:</i> 205697 <i>Board Certified Specialty:</i> Yes RADY CHILDRENS HEALTH NETWORK 5776 RUFFIN RD SAN DIEGO, CA 92123-1013 <i>Phone:</i> (858) 966-4900 <i>Fax:</i> (858) 268-5145 <i>After Hours Phone:</i> (858) 966-4900 <i>Provider Gender:</i> Male <i>License number:</i> A77327 <i>NPI:</i> 1609801299 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No
GENG, BOB <i>Provider ID:</i> 205823 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

HOFFMAN, HAROLD M

Provider ID: 206004
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Male
License number: A53101
NPI: 1326074261
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAUBACH, SUSAN S

Provider ID: 205803
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013

Phone: (858) 966-4900
Fax: (858) 268-5145
After Hours Phone: (858) 966-4900
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAUBACH, SUSAN S

Provider ID: 205804
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A114061
NPI: 1366656209
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SYDNEY A

Provider ID: 205724
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
5776 RUFFIN RD
SAN DIEGO, CA 92123-1013
Phone: (858) 292-1144
Fax: (858) 268-5145
After Hours Phone: (858) 292-1144
Provider Gender: Male
License number: A116427
NPI: 1861666919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

LEIBEL, SYDNEY A
Provider ID: 205725
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 NORTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Male
License number: A116427
NPI: 1861666919
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEONARD, STEPHANIE A
Provider ID: 205642
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2 NORTH
 SAN DIEGO, CA 92123-4232

Phone: (858) 966-5961
Fax: (858) 966-6791
After Hours Phone: (858) 966-5961
Provider Gender: Female
License number: A117476
NPI: 1003074469
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STONE, BRIAN D
Provider ID: 206333
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 2655 CAMINO DEL RIO N STE 120
 SAN DIEGO, CA 92108-1633
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619) 286-6687
Provider Gender: Male
License number: G88917
NPI: 1013907286
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial

Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WALTERS, KRISTEN M
Provider ID: 206255
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 5776 RUFFIN RD
 SAN DIEGO, CA 92123-1013
Phone: (858) 966-4900
Fax: (858) 966-4051
After Hours Phone: (858) 966-4900
Provider Gender: Female
License number: A129955
NPI: 1437442308
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

BASSI, HARJOT K

Provider ID: 205768
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7903
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A137189
NPI: 1891025565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DAVIS, CHRISTOPHER K

Provider ID: 51909
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A100260

NPI: 1760691950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Scripps
 Memorial Hospital, Sharp
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DAVIS, CHRISTOPHER K

Provider ID:
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A100260
NPI: 1760691950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Grossmont Hospital, Scripps
 Memorial Hospital, Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOMICO, MICHELE B

Provider ID: 216855
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A83525
NPI: 1932305000
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Foothill
 Regional Medical Center, Hoag
 Memorial Hospital Presbyterian,
 South Coast Global Medical
 Center Inc, Hoag Hospital Irvine,
 Anaheim Global Medical Center,
 Orange County Global Medical
 Center Inc, Chapman Global
 Medical Center Inc, St Joseph
 Hospital Orange, Childrens
 Hospital At Mission, Childrens
 Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DO, THOMAS B

Provider ID: 206162
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 366-5855
Fax: (858) 966-7423
After Hours Phone: (858) 366-5855
Provider Gender: Male
License number: A107618
NPI: 1053545376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hospital At Mission, Childrens Hospital Of Orange County
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EL SAID, HOWAIDA G

Provider ID: 205903
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 571-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A93820
NPI: 1619030194
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EL SAID, HOWAIDA G

Provider ID: 51913
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A93820
NPI: 1619030194
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FAGAN, BRIAN T

Provider ID: 205346
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A82153
NPI: 1740308550
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 571-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> A52799 <i>NPI:</i> 1225109085 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
FAGAN, BRIAN T <i>Provider ID:</i> 68145 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> A82153 <i>NPI:</i> 1740308550 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> San Gabriel Valley Med Ctr, California Hosp Med Ctr Los Angeles, Emanate Health Inter-Community Hospital, Rady Childrens Hospital San Diego, Huntington Memorial Hospital, Emanate Health Queen Of The Valley Hospital, Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM	GOMEZ AROSTEGUI, JULIANA <i>Provider ID:</i> 284126 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Female <i>License number:</i> A76083 <i>NPI:</i> 1962439141 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Santa Clara Valley Med Ctr, Good Samaritan Hospital, Lucile Salter Packard Childrens Hosp, El Camino Hospital, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	GROSSFELD, PAUL D <i>Provider ID:</i> 51917 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> (858) 966-7903 <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> A52799 <i>NPI:</i> 1225109085
	GROSSFELD, PAUL D <i>Provider ID:</i> 205615 <i>Board Certified Specialty:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GUPTA, AAMISHA E

Provider ID: 119948
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: A151188
NPI: 1356639595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GUPTA, AAMISHA E

Provider ID: 205884
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: A151188
NPI: 1356639595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HALEY, JESSICA E

Provider ID: 205687
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
 966-5855
Provider Gender: Female
License number: A125568
NPI: 1023329885
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HEGDE, SANJEET R

Provider ID: 206079
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY # 5003
 MC
 SAN DIEGO, CA 92123-4223
Phone: (858) 309-6300
Fax: (858) 966-7903
After Hours Phone: (858)
 309-6300
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HEGDE, SANJEET R

Provider ID: 261963
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A112326
 NPI: 1306036884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MCCANDLESS, RACHEL T

Provider ID: 206147
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-4912
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-4912
 Provider Gender: Female
 License number: A131801
 NPI: 1487821815
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MOORE, JOHN W

Provider ID: 51919
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax:
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: G71756
 NPI: 1831203124

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ronald Reagan UCLA Med Ctr, Childrens Hospital Of Orange County, Rady Childrens Hospital San Diego, Grossmont Hospital, Childrens Hosp And Resrch Ctr At Oakland, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MORCHI, GIRA S

Provider ID: 205369
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 571-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Female
 License number: A103210
 NPI: 1386790996
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pih Health Hospital - Whittier, Childrens Hospital Of Orange County, Mission Hospital Regional Med Center
 Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NARAYAN, HARI K

Provider ID: 112874
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-1700
 Fax:
 After Hours Phone: (858) 576-1700
 Provider Gender: Male
 License number: A144821
 NPI: 1376705707
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

NARAYAN, HARI K

Provider ID: 205349

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A144821
 NPI: 1376705707
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PERRY, JAMES C

Provider ID: 205695
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: G76012
 NPI: 1861474561
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PERRY, JAMES C

Provider ID: 51921
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: G76012
 NPI: 1861474561
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

POUR MOLKARA, DELARAM

Provider ID: 262423
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 2333 CAMINO DEL RIO S STE 340
 SAN DIEGO, CA 92108-3615
Phone: (619) 501-4015
Fax: (619) 501-2977
After Hours Phone: (619) 501-4015
Provider Gender: Female
License number: A94039
NPI: 1306074893
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PRINTZ, BETH J

Provider ID: 205655
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: G88440
NPI: 1790756518
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PRINTZ, BETH J

Provider ID: 51928
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: G88440
NPI: 1790756518
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAO, ROHIT P

Provider ID: 206122
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: C54276
NPI: 1063452779
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

SAH, SERENA P

Provider ID: 206215
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7423
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A113704
NPI: 1295042653
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SILVA SEPULVEDA, JOSE A

Provider ID: 206297
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855

Provider Gender: Male
License number: A120119
NPI: 1417222472
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STRINGER, JESSE D

Provider ID: 206296
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
License number: A120899
NPI: 1972745388
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SUN, HEATHER Y

Provider ID: 206146
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 571-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
License number: A107943
NPI: 1811173883
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

VAUGHN, GABRIELLE R

Provider ID: 205643
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

Phone: (858) 576-1700
 Fax: (858) 966-7423
 After Hours Phone: (858) 576-1700
 Provider Gender: Female
 License number: A109772
 NPI: 1891004461
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WERHO, DAVID K

Provider ID: 206316
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7903
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A135895
 NPI: 1235391863
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

WILLIAMS, MATTHEW R

Provider ID: 206287
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax: (858) 966-7423
 After Hours Phone: (858) 966-5855
 Provider Gender: Male
 License number: A109398
 NPI: 1831423250
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

BARRIO, VICTORIA R

Provider ID: 242321
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Female
 License number: A91617
 NPI: 1598836355
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BARRIO, VICTORIA R

Provider ID: 253507
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Female
 License number: A91617
 NPI: 1598836355
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BOIKO, SUSAN

Provider ID: 242304
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6795
 Fax:
 After Hours Phone: (858) 966-6795
 Provider Gender: Female
 License number: G41069
 NPI: 1053488981
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

ABE, NAOMI

Provider ID: 205684
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A137946
 NPI: 1821387572
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network

AMINLARI, AMIR

Provider ID: 205574
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:
 After Hours Phone: (858) 966-8800
 Provider Gender: Male
 License number: A94415
 NPI: 1316964380
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

AUSTIN PAGE, LUKAS R

Provider ID: 205589
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A121721
NPI: 1326301862
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BRYL, AMY W

Provider ID: 205967
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A115044
NPI: 1497079487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr

At Oakland, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BUITENHUY, CASEY W

Provider ID: 206072
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A101203
NPI: 1578761409
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Good Samaritan Hospital, Regional Medical Ctr Of San Jose, Rady Childrens Hospital San Diego, Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CAMPBELL, SARA S

Provider ID: 206335
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:

After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A135089
NPI: 1841687563
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CAPELLA, MARINA N

Provider ID: 205721
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A125409
 NPI: 1265711709
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHANG, ELIZABETH L

Provider ID: 205649
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A141942
 NPI: 1962745745
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

CHAO, DAVID

Provider ID: 205822
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Male
 License number: A130713
 NPI: 1215120704
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Rady Childrens Health Network

CONRAD, HEATHER B

Provider ID: 205960
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:

After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A84564
 NPI: 1205813409
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Sharp Chula Vista Med Ctr, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

COYNE, CHRISTOPHER J

Provider ID: 206117
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 576-1700 Fax: (858) 966-7433 After Hours Phone: (858) 576-1700 Provider Gender: Male License number: A118054 NPI: 1043590169 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, El Centro Regional Medical Center Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
DEL RE, ANGELO Provider ID: 206081 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-8800 Fax: (858) 966-7433 After Hours Phone: (858) 966-8800 Provider Gender: Male License number: A129572 NPI: 1275761371 Provider English Spoken: Yes	DONOFRIO, JOY J Provider ID: 205375 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-8800 Fax: (858) 966-7433 After Hours Phone: (858) 966-8800 Provider Gender: Female License number: 20A11581 NPI: 1740571165 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Valley Childrens Hospital, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: Yes	EKPENYONG, ATIM O Provider ID: 205722 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 576-1700 Fax: (858) 966-7433 After Hours Phone: (858) 576-1700 Provider Gender: Female License number: A134969 NPI: 1932318565 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

ETKIN, MARC L

Provider ID: 205897
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A75092
NPI: 1194896852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GARDINER, MICHAEL A

Provider ID: 205728
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A124399

NPI: 1205178712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GIBONEY, JENNIFER C

Provider ID: 205925
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A130768
NPI: 1275895849
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
 Network

GUTGLASS, DAVID J

Provider ID: 205751
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: G77971
NPI: 1952472706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, St
 Joseph Hospital Orange,
 California Pacific Med Ctr,
 Southwest Healthcare System
 Wildomar, Childrens Hospital Of
 Orange County, Childrens Hosp
 And Resrch Ctr At Oakland,
 Southwest Healthcare System
 Murrieta, Providence Little Co Of
 Mary Med Ctr Torrance
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

HERSKOVITZ, SCOTT A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 261045
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A155234
NPI: 1225393499
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HOECKER, CYNTHIA C
Provider ID: 206026
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A53189
NPI: 1770654527
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUNTER, WENDY L
Provider ID: 206278
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A94607
NPI: 1053515551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health Network

ISHIMINE, PAUL T
Provider ID: 206236
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A79142
NPI: 1437184421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JOSHI, WEENA E
Provider ID: 262232
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A91208
NPI: 1376862177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JOSHI, WEENA E

Provider ID: 262234
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: A91208
NPI: 1376862177
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KANEGAYE, JOHN T

Provider ID: 206153
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: G67670
NPI: 1689745432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KANTHARIA, TINA H

Provider ID: 206291
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: A126911
NPI: 1659632362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KANTHARIA, TINA H

Provider ID: 262247
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: A126911
NPI: 1659632362

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

LUCIO, SIMON J

Provider ID: 206040
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Male
License number: G72884
NPI: 1306917158
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network
METCALF, ASHLEY M
Provider ID: 205348
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: 20A14115
NPI: 1073740205
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

MURRAY, MATTHEW P
Provider ID: 205759
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
 966-8800
Provider Gender: Male
License number: A115958
NPI: 1215103023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

OZCAN, ALI K

Provider ID: 287923
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Male
License number: A162669
NPI: 1265867683
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Turkish

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D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Loma Linda University Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PADE, KATHRYN H
Provider ID: 262411
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: A126029
NPI: 1215375183
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Stanford
 Health Care, Lucile Salter
 Packard Childrens Hosp, Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Rady Childrens Health
 Network
PATEL, BEENA H
Provider ID: 205583
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: A98529
NPI: 1366612848
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hospital Of Orange County,
 Rady Childrens Hospital San
 Diego, Southwest Healthcare
 System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PRITCHARD, AMY M
Provider ID: 205973
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: 20A13216
NPI: 1710140819
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
 Hosp And Resrch Ctr At
 Oakland, Rady Childrens
 Hospital San Diego, Scripps
 Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

RANASURIYA, DUNISHA G
Provider ID: 216970
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858)
 966-8800
Provider Gender: Female
License number: C161114
NPI: 1740468057
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RATNAYAKE, KRISTIN J

Provider ID: 206034

Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY # 5075
 MC

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
 966-8800

Provider Gender: Female

License number: A113599

NPI: 1679716658

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

RIVERA, GASPAR

Provider ID: 205979

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Male

License number: A132585

NPI: 1053754499

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Childrens Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SALEH, FAREED R

Provider ID: 206216

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
 966-8800

Provider Gender: Male

License number: A149736

NPI: 1366691115

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
 No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHWARTZ, KRISTY L

Provider ID: 206169

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: A121299

NPI: 1497080808

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare

System Wildomar, Childrens

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hosp And Resrch Ctr At
Oakland, Southwest Healthcare
System Murrieta, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

TAMAS, VANESSA L

Provider ID: 206212

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-7433

After Hours Phone: (858)
576-1700

Provider Gender: Female

License number: A101991

NPI: 1326225368

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Southwest Healthcare System
Wildomar, Childrens Hosp Of Los
Angeles, Southwest Healthcare
System Murrieta

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

TRAUT, JOEL

Provider ID: 205475

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-7433

After Hours Phone: (858)
576-1700

Provider Gender: Male

License number: C51079

NPI: 1982792065

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

ULRICH, STACEY L

Provider ID: 205847

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8036

Fax: (858) 966-7433

After Hours Phone: (858)
966-8036

Provider Gender: Female

License number: A76660

NPI: 1619049236

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

VAIDYA, KAMALA

Provider ID:

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

License number: A124814

NPI: 1083840920

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

VANE, JACKSON

Provider ID: 205883
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:
 After Hours Phone: (858) 966-8800
 Provider Gender: Male
 License number: A120394
 NPI: 1952608580
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No

Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

VARGAS, JACLYN

Provider ID: 285934
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858) 966-5841
 Provider Gender: Female
 License number: A144447
 NPI: 1619359718
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Lac Usc Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No

Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

VARGAS, JACLYN

Provider ID: 285935
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4223
 Phone: (858) 576-1700
 Fax: (858) 966-8479
 After Hours Phone: (858) 576-1700
 Provider Gender: Female
 License number: A144447
 NPI: 1619359718
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Lac Usc Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

VAYNGORTIN, TATYANA

Provider ID: 263012
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Female
 License number: A128532
 NPI: 1578967907
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: 
 Hours: M-SA 9AM-5PM
 Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WAI, SHANNON S

Provider ID: 205640
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY # 5075 MC
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A122459
NPI: 1528395282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WANG, YVETTE L

Provider ID: 263416
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A132451
NPI: 1710321278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YAPHOCKUN, KAREN K

Provider ID: 206184
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-7433
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: 20A13298
NPI: 1861880817
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

DEMETERCO BERGGREN, CARLA

Provider ID: 206161
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4 NORTH
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
License number: A98629
NPI: 1619130655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

GOTTSCHALK, MICHAEL E

Provider ID: 205777

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Male

License number: G55424

NPI: 1033280888

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KIM, JANE J

Provider ID: 206194

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: C51620

NPI: 1235200098

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Medical Ctr At Ucsf

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KLEIN, KAREN O

Provider ID: 206269

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)

966-4032

Provider Gender: Female

License number: G76034

NPI: 1760553515

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San

Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

MARINKOVIC, MAJA

Provider ID: 206139

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 4 NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858) 966-4032

Provider Gender: Female

License number: A95251

NPI: 1053469767

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Network

NEWFIELD, RON S

Provider ID: 205372

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 4
NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Provider Gender: Male

License number: A73875

NPI: 1679644421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Provider Gender: Female

License number: A104058

NPI: 1912112020

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PHILLIPS, SUSAN A

Provider ID: 205579

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 4
NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-6227

After Hours Phone: (858)
966-4032

Provider Gender: Female

License number: G85921

NPI: 1588735336

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

VARGAS TRUJILLO, MARCELA

Provider ID: 205605

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4032

Fax: (858) 966-4032

After Hours Phone: (858)
966-4032

Provider Gender: Female

License number: A139213

NPI: 1952534091

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

PEDIATRIC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GASTROENTEROLOGY	<i>Provider Gender:</i> Female <i>License number:</i> A146137 <i>NPI:</i> 1013396126 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
CASTANO, DANIELA <i>Provider ID:</i> 242976 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> (858) 560-6798 <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> A132006 <i>NPI:</i> 1851616478 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	DOHIL, RANJAN <i>Provider ID:</i> 205418 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SOUTH SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> (858) 966-8592 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> A73858 <i>NPI:</i> 1396816146 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Memorial Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18	FELDSTEIN, ARIEL E <i>Provider ID:</i> 205808 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SOUTH SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> (858) 560-6798 <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Male <i>License number:</i> C54991 <i>NPI:</i> 1174587281 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>♿ Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
CHU, ANGELA L <i>Provider ID:</i> 284173 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> (858) 560-6798 <i>After Hours Phone:</i> (858) 966-4003	GOYAL, NIDHI P <i>Provider ID:</i> 205598 <i>Board Certified Specialty:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A111133
NPI: 1598029332
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

NEWTON, KIMBERLY P
Provider ID: 205361
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A101980
NPI: 1912071655

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

ORDONEZ NARANJO, MARIA P
Provider ID: 205582
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A95983
NPI: 1275764458
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SCHWARZ, KATHLEEN B
Provider ID: 205885
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: G152263
NPI: 1265465918
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Rady Childrens Health Network

SCHWIMMER, JEFFREY B
Provider ID: 205414
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
License number: A60461
NPI: 1932270782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SIVAGNANAM, MAMATA

Provider ID: 206323
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A86863
NPI: 1932328747
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

YU, ELIZABETH L

Provider ID: 206312
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2 SOUTH
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
License number: A102372
NPI: 1538485586
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

ANDERSON, ERIC J

Provider ID: 205705
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A91428
NPI: 1346312964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ARISTIZABAL, MARIA P

Provider ID: 205762
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3010 CHILDRENS WAY # 2W

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A127586
NPI: 1154662583
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BRIGGS, BENJAMIN J

Provider ID: 274689
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
License number: A148562
NPI: 1952695777
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Naval Medical Ctr Sd Rbe
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BUSH, KELLY A

Provider ID: 274408
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY # 2
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A125141
NPI: 1073831079
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHOO, SUN H

Provider ID: 206115
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY # 2-WEST
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A112219
NPI: 1700047628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DING, HILDA H

Provider ID: 206173
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3010 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A144295
NPI: 1780813923

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ELSTER, JENNIFER D

Provider ID: 205769
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3010 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
 966-5811
Provider Gender: Female
License number: A144876
NPI: 1588866115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
 Network

GANESAN, ANUSHA P

Provider ID: 205882
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3010 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
 966-5811
Provider Gender: Female
License number: A147249
NPI: 1982091740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GLOUDE, NICHOLAS J

Provider ID: 205927
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-5811
Fax:
After Hours Phone: (858)
 966-5811

Provider Gender: Male
License number: A119146
NPI: 1447527833
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

KIM, JENNY M

Provider ID: 206235
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3010 CHILDRENS WAY #
 2-WEST
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858)
 966-5811
Provider Gender: Female
License number: A80257
NPI: 1255402012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

KUO, DENNIS J

Provider ID: 205433

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Male

License number: A84128

NPI: 1750492146

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ROBERTS, WILLIAM D

Provider ID: 206045

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY # 2-WEST

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Male

License number: A46026

NPI: 1245302561

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SCHIFF, DEBORAH E

Provider ID: 206127

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY # 2W

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Female

License number: G68457

NPI: 1922179779

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

THORNBURG, COURTNEY D

Provider ID: 206165

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Female

License number: C55985

NPI: 1538222310

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

⌘ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

WONG, VICTOR

Provider ID: 206149
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858) 966-5811

Provider Gender: Male

License number: A119433

NPI: 1154692473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

YOON, JANET M

Provider ID: 206270

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)

966-5811

Provider Gender: Female

License number: A81191

NPI: 1518166966

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Uc

Davis Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

YU, JENNIFER C

Provider ID: 206148

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)

966-5811

Provider Gender: Female

License number: A110445

NPI: 1326315599

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

ZAGE, PETER E

Provider ID: 206315

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3010 CHILDRENS WAY # 2W
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)

966-5811

Provider Gender: Male

License number: C141853

NPI: 1912003161

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PEDIATRIC INFECTIOUS DISEASES

BRADLEY, JOHN S

Provider ID: 205983

Board Certified Specialty: No
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Male
License number: G35234
NPI: 1740351592
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CANNAVINO, CHRISTOPHER R

Provider ID: 205358
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Male
License number: A86636
NPI: 1831260595
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CANNAVINO, CHRISTOPHER R

Provider ID: 205359
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY # 5041
SAN DIEGO, CA 92123-4223
Phone: (885) 966-7785
Fax:
After Hours Phone: (885) 966-7785
Provider Gender: Male
License number: A86636
NPI: 1831260595
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr, Childrens Hosp And
Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHRISTMAN, JAMESINA C

Provider ID: 259978
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens
Hosp Of Los Angeles, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/19
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CHRISTMAN, JAMESINA C

Provider ID: 259980
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 4305 UNIVERSITY AVE STE 150
 SAN DIEGO, CA 92105-1690
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
License number: A93574
NPI: 1538372032
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/19
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MILDER, EDMUND A
Provider ID: 289138
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Male
License number: C175758
NPI: 1760460026
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PONG, ALICE
Provider ID: 205626
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Female
License number: G75974
NPI: 1568533313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucds La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Ucds Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPECTOR, STEPHEN A
Provider ID: 206301
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-8089
Fax: (619) 298-2698
After Hours Phone: (619) 543-8089
Provider Gender: Male
License number: G32467
NPI: 1790857316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucds Medical Ctr, Scripps Mercy Hospital, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPECTOR, STEPHEN A
Provider ID: 206302
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Male
License number: G32467
NPI: 1790857316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Scripps Mercy
 Hospital, Childrens Hosp And
 Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TREMOULET, ADRIANA H
Provider ID: 205392
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 246-0157
Fax: (858) 246-0156
After Hours Phone: (858)
 246-0157
Provider Gender: Female
License number: A76788
NPI: 1013015445
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Scripps
 Mercy Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Scripps Memorial
 Hospital Encinitas, Childrens
 Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

TREMOULET, ADRIANA H
Provider ID: 205393
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
 966-7785
Provider Gender: Female
License number: A76788
NPI: 1013015445
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Scripps
 Mercy Hospital, Sharp Mary
 Birch Hosp For Women And
 Newborns, Scripps Memorial

Hospital Encinitas, Childrens
 Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PEDIATRIC NEPHROLOGY

BENADOR, NADINE M
Provider ID: 205908
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax:
After Hours Phone: (858)
 966-8052
Provider Gender: Female
License number: A84483
NPI: 1366513129
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

CARTER, CAITLIN E

Provider ID: 205641
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: A93600
NPI: 1255514618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUNTA, SUJANA S

Provider ID: 205947
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746

Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A109056
NPI: 1932304342
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

INGULLI, ELIZABETH G

Provider ID: 206322
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST # 10
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
License number: G87981
NPI: 1811919244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego,

Ucsd Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KIMBALL, AMY L

Provider ID: 262149
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: A87696
NPI: 1932255668
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Scripps Mercy Hospital, Southwest Healthcare System Wildomar, Scripps Mercy Hospital Chula Vista, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

NOURBAKHSH, NOUREDDIN D

Provider ID: 205604

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Male

License number: 20A11746

NPI: 1801082003

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

PANNELL, JEFFREY S

Provider ID: 262369

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 120

SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858) 966-8574

Provider Gender: Male

License number: A120161

NPI: 1346426996

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network, Ucsd Medical Group

PERENS, ELLIOT A

Provider ID: 205726

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Male

License number: A108840

NPI: 1922328947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland, Medical Ctr At Ucsf

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

YORGIN, PETER D

Provider ID: 206225

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

8001 FROST ST # 1

ENTRANCE

SAN DIEGO, CA 92123-2746

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858) 966-8052

Provider Gender: Male

License number: G64029

NPI: 1023039831

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-6789 <i>Fax:</i> (858) 966-6706 <i>After Hours Phone:</i> (858) 966-1700 <i>Provider Gender:</i> Male <i>License number:</i> A44985 <i>NPI:</i> 1205907060 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
PEDIATRIC ORTHOPEDICS		
CHAMBERS, HENRY G <i>Provider ID:</i> 205793 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-5999 <i>Fax:</i> (858) 576-8412 <i>After Hours Phone:</i> (858) 576-5999 <i>Provider Gender:</i> Male <i>License number:</i> A44985 <i>NPI:</i> 1205907060 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	EDMONDS, ERIC W <i>Provider ID:</i> 205492 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY STE 410 SAN DIEGO, CA 92123-4228 <i>Phone:</i> (858) 966-6789 <i>Fax:</i> (858) 966-6706 <i>After Hours Phone:</i> (858) 966-6789 <i>Provider Gender:</i> Male <i>License number:</i> A86165 <i>NPI:</i> 1013048412 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hospital San Diego,	EDMONDS, ERIC W <i>Provider ID:</i> 205494 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 190 SAN DIEGO, CA 92123-2731 <i>Phone:</i> (858) 966-9360 <i>Fax:</i> (858) 966-8519 <i>After Hours Phone:</i> (858) 966-9360 <i>Provider Gender:</i> Male <i>License number:</i> A86165 <i>NPI:</i> 1013048412 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health
CHAMBERS, HENRY G <i>Provider ID:</i> 217680 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 3	EDMONDS, ERIC W <i>Provider ID:</i> 205492 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY STE 410 SAN DIEGO, CA 92123-4228 <i>Phone:</i> (858) 966-6789 <i>Fax:</i> (858) 966-6706 <i>After Hours Phone:</i> (858) 966-6789 <i>Provider Gender:</i> Male <i>License number:</i> A86165 <i>NPI:</i> 1013048412 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego,	EDMONDS, ERIC W <i>Provider ID:</i> 205494 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 190 SAN DIEGO, CA 92123-2731 <i>Phone:</i> (858) 966-9360 <i>Fax:</i> (858) 966-8519 <i>After Hours Phone:</i> (858) 966-9360 <i>Provider Gender:</i> Male <i>License number:</i> A86165 <i>NPI:</i> 1013048412 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health

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D. Directorio de proveedores de atención especializada

Network

EDMONDS, ERIC W

Provider ID: 205495
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

EDMONDS, ERIC W

Provider ID: 260841
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A86165
NPI: 1013048412
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

NEWTON, PETER O

Provider ID: 242970
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax:
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A45168
NPI: 1023189883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,

Doctors Hospital Of Riverside Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PENNOCK, ANDREW T

Provider ID: 262451
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A90049
NPI: 1619151685
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

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D. Directorio de proveedores de atención especializada

PRING, MAYA E

Provider ID: 205779
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A77003
NPI: 1104997964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PRING, MAYA E

Provider ID: 205781
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female

License number: A77003
NPI: 1104997964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RICKERT, KATHLEEN D

Provider ID: 205977
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY # 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: A140439
NPI: 1023308921
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

UPASANI, VIDYADHAR V

Provider ID: 205914
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A97603
NPI: 1548417652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

UPASANI, VIDYADHAR V

Provider ID: 205916
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Male
 License number: A97603
 NPI: 1548417652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

UPASANI, VIDYADHAR V
 Provider ID: 260953
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858)
 966-6789
 Provider Gender: Male
 License number: A97603
 NPI: 1548417652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

WALLACE, CHARLES D
 Provider ID: 205661
 Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858)
 966-6789
 Provider Gender: Male
 License number: G67953
 NPI: 1144229600
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Parkview Community Hospital
 Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

WALLACE, CHARLES D

Provider ID: 205662
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
 Phone: (858) 966-9360
 Fax: (858) 966-8519
 After Hours Phone: (858)
 966-9360
 Provider Gender: Male
 License number: G67953
 NPI: 1144229600
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Doctors Hospital Of Riverside Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

WALLACE, CHARLES D
 Provider ID: 205663
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5999
 Fax: (858) 576-8412
 After Hours Phone: (858)
 966-5999
 Provider Gender: Male
 License number: G67953
 NPI: 1144229600

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Doctors Hospital Of Riverside Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

NEWBURY, ROBERT O

Provider ID: 205613
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858)
 966-5944

Provider Gender: Male
License number: A49890
NPI: 1205907961
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

TUCKER, SUZANNE M

Provider ID: 205378
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858)
 966-5944
Provider Gender: Female
License number: A149311
NPI: 1326210527
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRIC PATHOLOGY

MO, JUN Q

Provider ID: 205432
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY # 5007
 MC
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5944
Fax: (858) 966-8087
After Hours Phone: (858)
 966-5944
Provider Gender: Female
License number: A72760
NPI: 1952402786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN A

Provider ID: 205673
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY # 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858)
 966-5846
Provider Gender: Female
License number: A96565
NPI: 1912169061
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BHATTACHARJEE, RAKESH

Provider ID: 102439

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Male

License number: C138339

NPI: 1588781173

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BHATTACHARJEE, RAKESH

Provider ID: 205950

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)

966-5846

Provider Gender: Male

License number: C138339

NPI: 1588781173

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

BHATTACHARJEE, RAKESH

Provider ID: 246060

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax:

After Hours Phone: (858)

576-1700

Provider Gender: Male

License number: C138339

NPI: 1588781173

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CERNELC KOHAN, MATEJKA

Provider ID: 243041

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)

966-5846

Provider Gender: Female

License number: A116947

NPI: 1871752451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CERNELC KOHAN, MATEJKA

Provider ID: 243042

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

License number: A116947

NPI: 1871752451

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens
Hosp And Resrch Ctr At

Oakland, Rady Childrens
Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

CHENG, EULALIA R

Provider ID: 205827

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY # 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

License number: C142765

NPI: 1750394862

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

DUONG, THU A

Provider ID: 260354

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2
NORTH

SAN DIEGO, CA 92123-4232

Phone: (858) 966-5846

Fax: (858) 569-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

License number: A127187

NPI: 1326309881

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

DUONG, THU A

Provider ID: 260356

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

License number: A127187

NPI: 1326309881

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

LANDEO GUTIERREZ, JEREMY S

Provider ID: 284176
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5846
 Fax: (858) 569-9052
 After Hours Phone: (858) 966-5846
 Provider Gender: Male
 License number: A172945
 NPI: 1255750360
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LANDEO GUTIERREZ, JEREMY S

Provider ID: 284177
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 966-8457
 After Hours Phone: (858) 966-5846

Provider Gender: Male
 License number: A172945
 NPI: 1255750360
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LESSER, DANIEL J

Provider ID: 205890
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 NORTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 569-5847
 After Hours Phone: (858) 966-5846

Provider Gender: Male
 License number: A89883
 NPI: 1427274679
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp Of Los Angeles
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LIM, MEERANA

Provider ID: 206039
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 NORTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 569-5847
 After Hours Phone: (858) 966-5846

Provider Gender: Female
 License number: A79998
 NPI: 1073684833
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

RAO, APARNA R

Provider ID: 118515
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED

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D. Directorio de proveedores de atención especializada

FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5846
 Fax:
 After Hours Phone: (858) 966-5846
 Provider Gender: Female
 License number: C54275
 NPI: 1649222340
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RAO, APARNA R
 Provider ID: 206123
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5846
 Fax: (858) 569-9052
 After Hours Phone: (858) 966-5846
 Provider Gender: Female
 License number: C54275
 NPI: 1649222340
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi

Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

RAO, APARNA R
 Provider ID: 206124
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 966-5847
 After Hours Phone: (858) 966-5846
 Provider Gender: Female
 License number: C54275
 NPI: 1649222340
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health

Network

RYU, JULIE
 Provider ID: 206218
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 2
 NORTH
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-5846
 Fax: (858) 569-5847
 After Hours Phone: (858) 966-5846
 Provider Gender: Female
 License number: A94343
 NPI: 1568533321
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

TANTISIRA, KELAN G
 Provider ID: 277183
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Male
License number: G67143
NPI: 1760420434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PEDIATRIC RADIOLOGY

GROVER, RYAN S
Provider ID: 206104
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101
Phone: (858) 549-7400
Fax:
After Hours Phone: (858)
549-7400
Provider Gender: Male
License number: A81474
NPI: 1346251287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,

Scripps Memorial Hospital,
Scripps Green Hospital, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

PUGMIRE, BRIAN S
Provider ID: 285401
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A138998
NPI: 1609190578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PUGMIRE, BRIAN S
Provider ID: 285403
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A138998
NPI: 1609190578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Valley
Childrens Hospital, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA C
Provider ID: 246394
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 966-8082
Fax:
After Hours Phone: (858)
966-8082

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D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A98479
NPI: 1821242199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

CHIRASEVEENUPRAPUND, PETER

Provider ID: 205936
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-6791
After Hours Phone: (858)
 966-7484
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):

No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

CHIRASEVEENUPRAPUND, PETER

Provider ID: 283268
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-8082
Fax: (858) 966-6791
After Hours Phone: (858)
 966-8082
Provider Gender: Male
License number: A68277
NPI: 1467518209
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

SHEETS, ROBERT M

Provider ID: 255900

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-8082
Fax: (858) 966-6791
After Hours Phone: (858)
 966-8082
Provider Gender: Male
License number: G31567
NPI: 1013088772
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/21
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

PEDIATRICS

AJAYI, TOLUWALASE A

Provider ID: 205719
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
 966-5841
Provider Gender: Female
License number: A121454

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1316175912 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Green Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	No <i>Accessibility:</i> P, EB, IB, E, R, T <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SPECIALISTS SAN DIEGO MED FNDTN 3665 KEARNY VILLA RD # 501 SAN DIEGO, CA 92123-1953 <i>Phone:</i> (858) 966-5803 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5803 <i>Provider Gender:</i> Female <i>License number:</i> A128091 <i>NPI:</i> 1013278704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
ALAGIRI, MADHU <i>Provider ID:</i> 206387 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-7484 <i>Fax:</i> (858) 966-4064 <i>After Hours Phone:</i> (858) 966-7484 <i>Provider Gender:</i> Male <i>License number:</i> G83089 <i>NPI:</i> 1619083961 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i>	AMATYA, SUDHA <i>Provider ID:</i> 122458 <i>Board Certified Specialty:</i> No CITY HEIGHTS FAMILY HEALTH CENTERS INC 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2400 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2400 <i>Provider Gender:</i> Female <i>License number:</i> A51563 <i>NPI:</i> 1790830511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> City Heights Family Health Centers Inc <i>IPA:</i>	AYSON, NICOLE M <i>Provider ID:</i> 110025 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A128091 <i>NPI:</i> 1013278704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
AYSON, NICOLE M <i>Provider ID:</i> 110023 <i>Board Certified Specialty:</i> No RADY CHILDRENS		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

AYSON, NICOLE M
Provider ID: 110512
Board Certified Specialty: No
 FAMILY HLTH CTR SAN
 DIEGO- CITY COLLEGE
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619)
 515-2525
Provider Gender: Female
License number: A128091
NPI: 1013278704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr
 San Diego- City College

IPA: Rady Childrens Health
 Network
AYSON, NICOLE M
Provider ID: 205685
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3665 KEARNY VILLA RD # 501
 SAN DIEGO, CA 92123-1953
Phone: (858) 966-5803
Fax: (858) 966-5992
After Hours Phone: (858)
 966-5803
Provider Gender: Female
License number: A128091
NPI: 1013278704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

AYSON, NICOLE M
Provider ID: 205686
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
 966-5841

Provider Gender: Female
License number: A128091
NPI: 1013278704
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

BAI-TONG, SHIYU S
Provider ID: 283285
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858)
 966-5818
Provider Gender: Female
License number: A155419
NPI: 1528454188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A60054 <i>NPI:</i> 1457420713 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Palomar Health Downtown Campus, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
BEAUCHAMP WALTERS, JULIA <i>Provider ID:</i> 270063 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A60054 <i>NPI:</i> 1457420713 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/25 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	CAMERON, MELISSA A <i>Provider ID:</i> 205965 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A125249 <i>NPI:</i> 1902983752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>	CAMERON, MELISSA A <i>Provider ID:</i> 79851 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A125249 <i>NPI:</i> 1902983752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>
BEAUCHAMP WALTERS, JULIA <i>Provider ID:</i> 52775 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN	CAMERON, MELISSA A <i>Provider ID:</i> 205965 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A125249 <i>NPI:</i> 1902983752 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego,	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

CANTU, ALICIA O

Provider ID: 205752

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)
966-8800

Provider Gender: Female

License number: A72946

NPI: 1922179688

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CANTU, ALICIA O

Provider ID: 205753

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE
300

SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)
966-8974

Provider Gender: Female

License number: A72946

NPI: 1922179688

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CANTU, ALICIA O

Provider ID: 52787

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A72946

NPI: 1922179688

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CARROLL, JEANNE M

Provider ID: 108883

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: A118050

NPI: 1386928224

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

CHEN, JENNIFER K

Provider ID: 205729

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A141057
NPI: 1255785150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CHIRASEVEENUPRAPUND, PETER
Provider ID: 86506
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax:
After Hours Phone: (858) 966-7484
Provider Gender: Male
License number: A68277
NPI: 1467518209

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* P, EB, IB, E, R,
 T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CHONG, AMY
Provider ID: 259993
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5803
Fax: (858) 966-5992
After Hours Phone: (858) 966-5803
Provider Gender: Female
License number: A133965
NPI: 1720423288
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

COHENMEYER, CASEY L
Provider ID: 52560
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-7433
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A80114
NPI: 1033286430
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Scripps Memorial Hospital, Ucsd
 Medical Ctr, Southwest
 Healthcare System Wildomar,
 Scripps Memorial Hospital
 Encinitas, Southwest Healthcare
 System Murrieta, Sharp
 Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

CORDES, WILLIAM D

Provider ID: 122494
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: 20A15743
NPI: 1174942544
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

DE LA ROSA, IVONNE E

Provider ID: 206027
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female

License number: A49734
NPI: 1174695795
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Memorial Hospital, Rady Childrens Hospital San Diego, El Centro Regional Medical Center, Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEL RE, ANGELO

Provider ID: 82886
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A129572
NPI: 1275761371
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego,

Childrens Hosp And Resrch Ctr At Oakland, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOSHI, AMI P

Provider ID: 205329
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A95217
NPI: 1801099676
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network DOSHI, AMI P <i>Provider ID:</i> 205330 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY STE 300 SAN DIEGO, CA 92123-4228 <i>Phone:</i> (858) 966-8974 <i>Fax:</i> (858) 966-6721 <i>After Hours Phone:</i> (858) 966-8974 <i>Provider Gender:</i> Female <i>License number:</i> A95217 <i>NPI:</i> 1801099676 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Gujarati, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Palomar Health Downtown Campus, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network DO, THOMAS B <i>Provider ID:</i> 101284 <i>Board Certified Specialty:</i> No RADY CHILDRENS	SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Male <i>License number:</i> A107618 <i>NPI:</i> 1053545376 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hospital At Mission, Childrens Hospital Of Orange County <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network DUONG, THU A <i>Provider ID:</i> 103011 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Female	<i>License number:</i> A127187 <i>NPI:</i> 1326309881 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network DWORSKY, ZEPHYR D <i>Provider ID:</i> 272293 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A144121 <i>NPI:</i> 1427443803 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMUNDS, MICHELLE A

Provider ID: 102047
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax: (858) 966-6728
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A129816
NPI: 1881958064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EDMUNDS, MICHELLE A

Provider ID: 205864
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A129816
NPI: 1881958064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

EKPENYONG, ATIM O

Provider ID: 97424
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax:
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: A134969
NPI: 1932318565
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System

Wildomar, Southwest Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

ELSTER, JENNIFER D

Provider ID: 109562
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5811
Fax:
After Hours Phone: (858) 966-5811
Provider Gender: Female
License number: A144876
NPI: 1588866115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

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D. Directorio de proveedores de atención especializada

ETKIN, MARC L

Provider ID: 51983
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: A75092
NPI: 1194896852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FEIGENBAUM, ANNETTE S

Provider ID: 205595
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY # 4
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5840
Fax: (858) 966-7942
After Hours Phone: (858) 966-5840
Provider Gender: Female

License number: C54803
NPI: 1902187859
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FISHER, ERIN R

Provider ID: 205906
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 300
 SAN DIEGO, CA 92123-4228
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
License number: G66360
NPI: 1841361508
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FISHER, ERIN R

Provider ID: 205907
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-5841
Fax:
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: G66360
NPI: 1841361508
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FISHER, ERIN R

Provider ID: 260913
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858) 966-5841

Provider Gender: Female

License number: G66360

NPI: 1841361508

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

FLEMING, SARAH E

Provider ID: 104812

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

4077 5TH AVE

SAN DIEGO, CA 92103-2105

Phone: (619) 260-7046

Fax: (619) 686-3843

After Hours Phone: (619)

260-7046

Provider Gender: Female

License number: A89838

NPI: 1679809826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Scripps Mercy Hospital

Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

FORTUNE, ERIN L

Provider ID: 38555

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Male

License number: A95577

NPI: 1801088422

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

GAHAGAN, SHEILA

Provider ID: 214387

Board Certified Specialty: No

UCSD MEDICAL GROUP

7910 FROST ST STE 230

SAN DIEGO, CA 92123-2776

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: C53666

NPI: 1053327221

Provider English Spoken: Yes

Provider Language(s) Spoken:

French

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

GANESAN, ANUSHA P

Provider ID: 114913

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3010 CHILDRENS WAY # 2W

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5811

Fax:

After Hours Phone: (858)

966-5811

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

License number: A147249
 NPI: 1982091740
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GHAFOURI, NAZLI

Provider ID: 257249
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax:
 After Hours Phone: (858)
 966-8800
 Provider Gender: Female
 License number: A94326
 NPI: 1942325113
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: California
 Pacific Med Ctr Pacific Campus,
 California Pacific Medical Center
 - Mission Bernal Campus, Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GIST, LAUREN

Provider ID: 214433
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 7910 FROST ST STE 230
 SAN DIEGO, CA 92123-2776
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A81381
 NPI: 1023105335
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

GLENN, TARA J

Provider ID: 283159
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858)
 966-5818
 Provider Gender: Female
 License number: A170207
 NPI: 1992060974
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GOLEMBESKI, DAVID J

Provider ID: 83625
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-3759
 Fax:
 After Hours Phone: (619)
 543-3759
 Provider Gender: Male
 License number: G63111
 NPI: 1376614131
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Scripps Memorial Hospital
Encinitas, Pomerado Hospital,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Palomar
Medical Center, Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOTTSCHALK, MICHAEL E
Provider ID: 52040
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Male
License number: G55424
NPI: 1033280888
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GREENBERG, MARK
Provider ID: 63927
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G63733
NPI: 1710906375
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GUNTA, SUJANA S
Provider ID: 80521
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: A109056
NPI: 1932304342
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Marathi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego, Tri
City Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HEGDE, SANJEET R
Provider ID: 74643
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A112326
NPI: 1306036884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HERSHEY, DANIEL W

Provider ID: 205990

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858)

966-8800

Provider Gender: Male

License number: A82477

NPI: 1063435055

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HERSHEY, DANIEL W

Provider ID: 205994

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 300

SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)

966-8974

Provider Gender: Male

License number: A82477

NPI: 1063435055

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HONOLD, JOSE A

Provider ID: 52532

Board Certified Specialty: No
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-7483

After Hours Phone: (858)
966-5841

Provider Gender: Male

License number: A51798

NPI: 1093886855

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Pioneers Memorial Hospital, El
Centro Regional Medical Center,
Southwest Healthcare System
Wildomar, Southwest Healthcare
System Murrieta, Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

HSIEH, LESLIE Q

Provider ID: 122435

Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax:

After Hours Phone: (858)

966-7484

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A120282
NPI: 1326207283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HSIEH, LESLIE Q

Provider ID: 206031
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: A120282
NPI: 1326207283
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUANG, MARIA Z

Provider ID: 102388
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A137270
NPI: 1770841140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUANG, MARIA Z

Provider ID: 205974
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A137270
NPI: 1770841140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

HUNTER, WENDY L

Provider ID: 52857
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
Fax:
After Hours Phone: (858) 576-1700
Provider Gender: Female
License number: A94607
NPI: 1053515551
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group KANTHARIA, TINA H Provider ID: 109309 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 576-1700 Fax: After Hours Phone: (858) 576-1700 Provider Gender: Female License number: A126911 NPI: 1659632362 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): Operation Samahan - Mira Mesa IPA: Community Care Ipa Llc	Phone: (844) 200-2426 Fax: After Hours Phone: (844) 200-2426 Provider Gender: Female License number: C54941 NPI: 1972536654 Provider English Spoken: Yes Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-F 8AM-4:30PM, SA 9AM-5PM Website: www.operationsamahan.org Email: Medical Group(s): Operation Samahan - Mira Mesa IPA: Community Care Ipa Llc
JONES, MARILYN C Provider ID: 52308 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 Phone: (858) 966-7484 Fax: (858) 966-4064 After Hours Phone: (858) 966-7484 Provider Gender: Female License number: G30850 NPI: 1295806040 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: P, EB, IB, E, R, T, W Hours: M-SA 9AM-5PM Website:	KANTHARIA, TINA H Provider ID: 109309 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 576-1700 Fax: After Hours Phone: (858) 576-1700 Provider Gender: Female License number: A126911 NPI: 1659632362 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network KARMAKAR, KANKA Provider ID: 116261 Board Certified Specialty: No OPERATION SAMAHAN - MIRA MESA 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375	KARMAKAR, KANKA, MD Provider ID: 213847 Board Certified Specialty: No COMMUNITY CARE IPA LLC 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375 Phone: (844) 200-2426 Fax: After Hours Phone: (844) 200-2426 Provider Gender: Female License number: C54941 NPI: 1972536654 Provider English Spoken: Yes Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KAUFHOLD, MARILYN J

Provider ID: 206213

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK

3665 KEARNY VILLA RD # 501

SAN DIEGO, CA 92123-1953

Phone: (858) 966-5803

Fax: (858) 966-5992

After Hours Phone: (858)

966-5803

Provider Gender: Female

License number: C33767

NPI: 1295806057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Childrens Hosp And Resrch

Ctr At Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KAUFHOLD, MARILYN J

Provider ID: 206214

Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: C33767

NPI: 1295806057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Childrens Hosp And Resrch

Ctr At Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KHARE, MANASWITHA

Provider ID: 109081

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A140062

NPI: 1912345307

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A140062

NPI: 1912345307

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> G76034 <i>NPI:</i> 1760553515 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
KIMBALL, AMY L <i>Provider ID:</i> 52537 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A87696 <i>NPI:</i> 1932255668 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Southwest Healthcare System Wildomar, Scripps Mercy Hospital Chula Vista, Southwest Healthcare System Murrieta, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>	KIM, JENNY M <i>Provider ID:</i> 52313 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5811 <i>Fax:</i> (858) 966-8035 <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> A80257 <i>NPI:</i> 1255402012 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	KUELBS, CYNTHIA L <i>Provider ID:</i> 205341 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-1726 <i>Fax:</i> (858) 966-6271 <i>After Hours Phone:</i> (858) 966-1726 <i>Provider Gender:</i> Female <i>License number:</i> G58415 <i>NPI:</i> 1932270691 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes
KLEIN, KAREN O <i>Provider ID:</i> 52052 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

KUO, DENNIS J

Provider ID: 91889
 Board Certified Specialty: No
 CHILDRENS HOSP SAN DIEGO CHADWICK CTR
 3010 CHILDRENS WAY # 2W
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5811
 Fax:
 After Hours Phone: (858) 966-5811
 Provider Gender: Male
 License number: A84128
 NPI: 1750492146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LAMBERTI, JOHN J

Provider ID: 205612
 Board Certified Specialty: Yes

RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227
 Phone: (858) 966-8030
 Fax: (858) 966-8032
 After Hours Phone: (858) 966-8030
 Provider Gender: Male
 License number: G19503
 NPI: 1518038371
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Sharp Memorial Hospital, Childrens Hospital Of Orange County, Childrens Hosp And Resrch Ctr At Oakland, Lucile Salter Packard Childrens Hosp, Stanford Health Care
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LANE, BRIAN P

Provider ID: 52539
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5841
 Provider Gender: Male
 License number: A73829
 NPI: 1427129287
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Sharp Chula Vista Med Ctr, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

LANGLEY, GREGORY H

Provider ID: 205698
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-8800
 Fax: (858) 966-7433
 After Hours Phone: (858) 966-8800
 Provider Gender: Male
 License number: G88047

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1427049675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LANGLEY, GREGORY H
 Provider ID: 52899
 Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 309-6290
 Fax:
 After Hours Phone: (858)
 309-6290
 Provider Gender: Male
 License number: G88047
 NPI: 1427049675
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network
LARROW, ANNIE N
 Provider ID: 276013
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A147181
 NPI: 1417344128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LAUB, NATALIE
 Provider ID: 274665
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A147181
 NPI: 1417344128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LAUB, NATALIE
 Provider ID: 274665
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A147181
 NPI: 1417344128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Ucsd La Jolla
 John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

Phone: (858) 966-5841
 Fax: (858) 966-6728
 After Hours Phone: (858)
 966-5841
 Provider Gender: Female
 License number: A168555
 NPI: 1336448083
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

LAUB, NATALIE
 Provider ID: 274666
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3665 KEARNY VILLA RD # 500
 SAN DIEGO, CA 92123-1953
 Phone: (858) 966-5980
 Fax: (858) 966-8535
 After Hours Phone: (858)
 966-5980
 Provider Gender: Female
 License number: A168555
 NPI: 1336448083
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A121976 <i>NPI:</i> 1407024995 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Polish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 292-1144 <i>Fax:</i> (858) 268-5145 <i>After Hours Phone:</i> (858) 292-1144 <i>Provider Gender:</i> Male <i>License number:</i> A116427 <i>NPI:</i> 1861666919 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
LEE, BEGEM <i>Provider ID:</i> 205923 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A126770 <i>NPI:</i> 1053672444 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> C143617 <i>NPI:</i> 1497982227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego,	LENZEN, CHRISTIANE <i>Provider ID:</i> 112872 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> C143617 <i>NPI:</i> 1497982227 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego,
LEIBEL, SYDNEY A <i>Provider ID:</i> 106806 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 5776 RUFFIN RD SAN DIEGO, CA 92123-1013	LEIBEL, SANDRA L <i>Provider ID:</i> 103580	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

University Hsp Of San Diego Co, Network

Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LENZEN, CHRISTIANE

Provider ID: 205978

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: C143617

NPI: 1497982227

Provider English Spoken: Yes

Provider Language(s) Spoken:

French, German

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

University Hsp Of San Diego Co

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

LEVY, MICHAEL

Provider ID: 206053

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Male

License number: A112901

NPI: 1699937250

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Cedars Sinai

Medical Center, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LE, CRYSTAL N

Provider ID: 52540

Board Certified Specialty: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)
966-5818

Provider Gender: Female

License number: A97634

NPI: 1003028416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Southwest Healthcare System

Wildomar, Southwest Healthcare

System Murrieta, Scripps

Memorial Hospital, Scripps

Memorial Hospital Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

LE, JOAN T

Provider ID: 206524

Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
300

SAN DIEGO, CA 92123-4228

Phone: (858) 966-8974

Fax: (858) 966-6721

After Hours Phone: (858)

966-8974

Provider Gender: Female

License number: A99391

NPI: 1447460050

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Doctors Hospital Of Riverside Llc, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

LUJAN, ARLEEN G

Provider ID: 25649
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: A61687
NPI: 1760412431
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME

Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

MANNINO AVILA, ELIZABETH E

Provider ID: 262161
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A117906
NPI: 1164747127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MANNINO AVILA, ELIZABETH E

Provider ID: 74656
Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A117906
NPI: 1164747127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MARDOUM, RIAD

Provider ID: 103913
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 260-7046
Fax:
After Hours Phone: (619) 260-7046
Provider Gender: Male
License number: A36720

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1417050584 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network MARIETTI SHEPHERD, SARAH R Provider ID: 206244 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 7930 FROST ST STE 407 SAN DIEGO, CA 92123-4286 Phone: (858) 279-8527 Fax: After Hours Phone: (858) 279-8527 Provider Gender: Female License number: A106447 NPI: 1801094115 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Network METCALF, ASHLEY M Provider ID: 101237 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-8800 Fax: After Hours Phone: (858) 966-8800 Provider Gender: Female License number: 20A14115 NPI: 1073740205 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network MISHRA-OCCHINO, SEEMA S Provider ID: 52907 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223
MARDOUM, RIAD Provider ID: 103916 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5841 Fax: After Hours Phone: (858) 966-5841 Provider Gender: Male License number: A36720 NPI: 1417050584 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr		

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D. Directorio de proveedores de atención especializada

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)
966-8800

Provider Gender: Female

License number: A100307

NPI: 1689612830

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MOBLEY, WILLIAM C

Provider ID: 128124

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR STE 325

SAN DIEGO, CA 92121-3069

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G36551

NPI: 1902941743

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MOYER, LAUREL B

Provider ID: 109470

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5818

Fax:

After Hours Phone: (858)

966-5818

Provider Gender: Female

License number: C144070

NPI: 1598970378

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Scripps Mercy Hospital, Scripps

Mercy Hospital Chula Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NELSON, THEODORA J

Provider ID: 257259

Board Certified Specialty: No

UCSD MEDICAL GROUP

7910 FROST ST STE 230

SAN DIEGO, CA 92123-2776

Phone: (858) 496-4800

Fax:

After Hours Phone: (858)

496-4800

Provider Gender: Female

License number: G75021

NPI: 1326130584

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NEWFIELD, RON S

Provider ID: 52057

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003

Fax:

After Hours Phone: (858)

966-4003

Provider Gender: Male

License number: A73875

NPI: 1679644421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NGUYEN, MARGARET B

Provider ID: 83870

Board Certified Specialty: No

RADY CHILDRENS

**SPECIALISTS SAN DIEGO MED
FNDTN**

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-8800

Fax:

After Hours Phone: (858)

966-8800

Provider Gender: Female

License number: A131847

NPI: 1942485248

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Childrens

Hosp And Resrch Ctr At

Oakland, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

NIENOW, SHALON M

Provider ID: 127354

Board Certified Specialty: No

RADY CHILDRENS

**SPECIALISTS SAN DIEGO MED
FNDTN**

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Female

License number: A155289

NPI: 1255592465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

University Of New Mexico

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NIENOW, SHALON M

Provider ID: 262189

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3665 KEARNY VILLA RD # 501

SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990

Fax: (858) 966-5992

After Hours Phone: (858)

966-5990

Provider Gender: Female

License number: A155289

NPI: 1255592465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

University Of New Mexico

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

NIENOW, SHALON M

Provider ID: 262190

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-6728

After Hours Phone: (858)

576-1700

Provider Gender: Female

License number: A155289

NPI: 1255592465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego, University Of New Mexico Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Male <i>License number:</i> A54747 <i>NPI:</i> 1841202710 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Marian Regional Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
ODONNELL, F JANE D <i>Provider ID:</i> 52506 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> G81056 <i>NPI:</i> 1477625325 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Southwest Healthcare System Wildomar, Childrens Hosp And Resrch Ctr At Oakland, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	PARDEE, PERRIE E <i>Provider ID:</i> 205767 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> (858) 966-6782 <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A123826 <i>NPI:</i> 1578850988 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	PATEL, AARTI R <i>Provider ID:</i> 205865 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> A142110 <i>NPI:</i> 1871813105 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
PARKER, PAUL C <i>Provider ID:</i> 205755 <i>Board Certified Specialty:</i> No	PARKER, PAUL C <i>Provider ID:</i> 205755 <i>Board Certified Specialty:</i> No	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PHILLIPS, SUSAN A

Provider ID: 52151
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
 966-4003
Provider Gender: Female
License number: G85921
NPI: 1588735336
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

Network

PIERCE, HEATHER C

Provider ID: 205701
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
 966-5841
Provider Gender: Female
License number: A103389
NPI: 1699955542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PIERCE, HEATHER C

Provider ID: 52797
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858)
 966-5841

Provider Gender: Female
License number: A103389
NPI: 1699955542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

RAMOS, CARLOS G

Provider ID: 102158
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax:
After Hours Phone: (619)
 543-3759
Provider Gender: Male
License number: A91944
NPI: 1205047545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, El Centro Regional Medical
 Center, Southwest Healthcare
 System Wildomar, Southwest
 Healthcare System Murrieta,
 Rady Childrens Hospital San
 Diego, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Network RIES, DAVID C Provider ID: 206082 Board Certified Specialty: Yes RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5841 Fax: After Hours Phone: (858) 966-5841 Provider Gender: Male License number: A127233 NPI: 1376705483 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	Phone: (858) 966-5811 Fax: After Hours Phone: (858) 966-5811 Provider Gender: Male License number: A46026 NPI: 1245302561 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network
RHEE, KYUNG E Provider ID: 206114 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 Phone: (858) 966-5841 Fax: (858) 966-6728 After Hours Phone: (858) 966-5841 Provider Gender: Female License number: A112676 NPI: 1013996529 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Palomar Medical Center, Palomar Health Downtown Campus Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health	ROBERTS, WILLIAM D Provider ID: 52318 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223	RODRIGUEZ, JAVIER Provider ID: 46966 Board Certified Specialty: No LA MAESTRA FAMILY CLINIC INC 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: (619) 255-9155 Fax: After Hours Phone: (619) 255-9155 Provider Gender: Male License number: A82639 NPI: 1013059385 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.lamaestra.org
Email:
Medical Group(s): La Maestra Family Clinic Inc
IPA:

RUNGVIVATJARUS, TIRANUN

Provider ID: 206319
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A141353
NPI: 1407276363
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAJTI, ENIKO C

Provider ID: 117483
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-3812
After Hours Phone: (619) 543-3759
Provider Gender: Female
License number: A115973
NPI: 1649433103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAJTI, ENIKO C

Provider ID: 83875
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818

Provider Gender: Female
License number: A115973
NPI: 1649433103
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SAWYER, CAROLYN M

Provider ID: 270318
Board Certified Specialty: No
UCSD MEDICAL GROUP
7910 FROST ST STE 350
SAN DIEGO, CA 92123-2753
Phone: (858) 496-4800
Fax: (858) 496-4850
After Hours Phone: (858) 496-4800
Provider Gender: Female
License number: A149116
NPI: 1043653249
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHNEIDER, SARAH M

Provider ID: 284224
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A151631
NPI: 1508210311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHWARZ, KATHLEEN B

Provider ID: 125422
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232

Phone: (858) 966-4003
Fax:
After Hours Phone: (858)
966-4003
Provider Gender: Female
License number: G152263
NPI: 1265465918
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SEBSO, JODI

Provider ID: 46712
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Provider Gender: Female
License number: A103099
NPI: 1538484316
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

SONG, RICHARD S

Provider ID: 70909
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858)
966-5818
Provider Gender: Male
License number: A112147
NPI: 1881893477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Pomerado Hospital, Southwest
Healthcare System Wildomar,
Southwest Healthcare System
Murrieta, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas, Palomar
Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SPECTOR, STEPHEN A <i>Provider ID:</i> 52328 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Male <i>License number:</i> G32467 <i>NPI:</i> 1790857316 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	SPECIALISTS SAN DIEGO MED FNDTN 330 LEWIS ST SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 543-8089 <i>Fax:</i> (619) 298-2698 <i>After Hours Phone:</i> (619) 543-8089 <i>Provider Gender:</i> Male <i>License number:</i> G32467 <i>NPI:</i> 1790857316 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>NPI:</i> 1801978143 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Mercy Hospital, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
SPECTOR, STEPHEN A <i>Provider ID:</i> 52329 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Male <i>License number:</i> G78658	SPEZIALE, MARK V <i>Provider ID:</i> 52555 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Male <i>License number:</i> G78658	SPITZER, MARSHA D <i>Provider ID:</i> 25654 <i>Board Certified Specialty:</i> No LOGAN HEIGHTS FAMILY HEALTH CENTER 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Provider Gender:</i> Female <i>License number:</i> A76785 <i>NPI:</i> 1851323315 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

STOVER, LAURIE B

Provider ID: 206196
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5841
Fax:
After Hours Phone: (858) 966-5841
Provider Gender: Female
License number: A71978
NPI: 1659442317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STRAIT, MARIE I

Provider ID: 273471

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5818
Fax:
After Hours Phone: (858) 966-5818
Provider Gender: Female
License number: C167351
NPI: 1669633012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

STRAIT, MARIE I

Provider ID: 273473
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax:
After Hours Phone: (619) 543-3759
Provider Gender: Female
License number: C167351
NPI: 1669633012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SURESH, PREMI T

Provider ID: 217863
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3685 KEARNY VILLA RD
SAN DIEGO, CA 92123-1950
Phone: (858) 966-5990
Fax: (858) 966-6728
After Hours Phone: (858) 966-5990
Provider Gender: Female
License number: A89651
NPI: 1558408559
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

SURESH, PREMI T

Provider ID: 265149

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 576-1700

Fax: (858) 966-6728

After Hours Phone: (858) 576-1700

Provider Gender: Female

License number: A89651

NPI: 1558408559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SURESH, PREMI T

Provider ID: 265150

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3665 KEARNY VILLA RD # 501
SAN DIEGO, CA 92123-1953

Phone: (858) 966-5990

Fax: (858) 966-7508

After Hours Phone: (858) 966-5990

Provider Gender: Female

License number: A89651

NPI: 1558408559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SURESH, PREMI T

Provider ID: 283161

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3665 KEARNY VILLA RD # 500
SAN DIEGO, CA 92123-1953

Phone: (858) 966-5980

Fax: (858) 966-5992

After Hours Phone: (858) 966-5980

Provider Gender: Female

License number: A89651

NPI: 1558408559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Palomar Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SUTTNER, DENISE M

Provider ID: 52558

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858) 966-5841

Provider Gender: Female

License number: A52313

NPI: 1457433799

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Scripps Memorial Hospital, Scripps

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	Network TAMAS, VANESSA L <i>Provider ID:</i> 109195 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> A101991 <i>NPI:</i> 1326225368 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Childrens Hosp Of Los Angeles, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Phone:</i> (858) 966-5811 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5811 <i>Provider Gender:</i> Female <i>License number:</i> C55985 <i>NPI:</i> 1538222310 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
SWEENEY, NATHALY M <i>Provider ID:</i> 127345 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Female <i>License number:</i> A110761 <i>NPI:</i> 1164572632 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health	THORNBURG, COURTNEY D <i>Provider ID:</i> 70905 <i>Board Certified Specialty:</i> No CHILDRENS HOSP SAN DIEGO CHADWICK CTR 3010 CHILDRENS WAY # 2W SAN DIEGO, CA 92123-4223	TOVAR PADUA, LEIDY J <i>Provider ID:</i> 128013 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A130894 <i>NPI:</i> 1033491311 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Childrens Hosp Of Los Angeles,

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D. Directorio de proveedores de atención especializada

Long Beach Memorial Med Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	4077 5TH AVE SAN DIEGO, CA 92103-2105 <i>Phone:</i> (619) 260-7046 <i>Fax:</i> <i>After Hours Phone:</i> (619) 260-7046 <i>Provider Gender:</i> Female <i>License number:</i> G25444 <i>NPI:</i> 1275615510 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
TREMOULET, ADRIANA H <i>Provider ID:</i> 121500 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-7785 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-7785 <i>Provider Gender:</i> Female <i>License number:</i> A76788 <i>NPI:</i> 1013015445 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital, Sharp Mary Birch Hosp For Women And Newborns, Scripps Memorial Hospital Encinitas, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W	VAUCHER, YVONNE E <i>Provider ID:</i> 107742 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4168 FRONT ST SAN DIEGO, CA 92103-2030 <i>Phone:</i> (619) 543-3771 <i>Fax:</i> (619) 543-7543 <i>After Hours Phone:</i> (619) 543-3771 <i>Provider Gender:</i> Female <i>License number:</i> G25444 <i>NPI:</i> 1275615510 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	VILLARROEL, SARAH A <i>Provider ID:</i> 205861 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3665 KEARNY VILLA RD # 501 SAN DIEGO, CA 92123-1953 <i>Phone:</i> (858) 966-5980 <i>Fax:</i> (858) 966-5992 <i>After Hours Phone:</i> (858) 966-5980 <i>Provider Gender:</i> Female <i>License number:</i> 20A9338 <i>NPI:</i> 1336205558 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At
VAUCHER, YVONNE E <i>Provider ID:</i> 52559 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN	VAUCHER, YVONNE E <i>Provider ID:</i> 52559 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN	

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D. Directorio de proveedores de atención especializada

Oakland, Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
VILLARROEL, SARAH A <i>Provider ID:</i> 205862 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5841 <i>Fax:</i> (858) 966-6728 <i>After Hours Phone:</i> (858) 966-5841 <i>Provider Gender:</i> Female <i>License number:</i> 20A9338 <i>NPI:</i> 1336205558 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Childrens Hosp And Resrch Ctr At Oakland, Rady Childrens Hospital San Diego, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i>	WAI, SHANNON S <i>Provider ID:</i> 70903 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-8800 <i>Fax:</i> (858) 966-7433 <i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A122459 <i>NPI:</i> 1528395282 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>After Hours Phone:</i> (858) 966-8800 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
WANG, EMILY J <i>Provider ID:</i> 126801 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363	WANG, EMILY J <i>Provider ID:</i> 126801 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN	WANG, EMILY J <i>Provider ID:</i> 126804 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690 <i>Phone:</i> (619) 280-2905 <i>Fax:</i> <i>After Hours Phone:</i> (619) 280-2905 <i>Provider Gender:</i> Female <i>License number:</i> A89393 <i>NPI:</i> 1427142363

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D. Directorio de proveedores de atención especializada

<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Memorial Hospital Encinitas, Rady Childrens Hospital San Diego, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	<i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	FNDTN 8001 FROST ST SAN DIEGO, CA 92123-2746 <i>Phone:</i> (858) 966-5855 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-5855 <i>Provider Gender:</i> Male <i>License number:</i> G64029 <i>NPI:</i> 1023039831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital, Childrens Hosp And Resrch Ctr At Oakland <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
WELCH, MICHAEL J <i>Provider ID:</i> 51907 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 5776 RUFFIN RD SAN DIEGO, CA 92123-1013 <i>Phone:</i> (858) 292-1144 <i>Fax:</i> <i>After Hours Phone:</i> (858) 292-1144 <i>Provider Gender:</i> Male <i>License number:</i> G34844 <i>NPI:</i> 1699794222 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No	YAPHOCKUN, KAREN K <i>Provider ID:</i> 113245 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 576-1700 <i>Fax:</i> <i>After Hours Phone:</i> (858) 576-1700 <i>Provider Gender:</i> Female <i>License number:</i> 20A13298 <i>NPI:</i> 1861880817 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	YU, ELIZABETH L <i>Provider ID:</i> 80373 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 966-4003 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-4003 <i>Provider Gender:</i> Female <i>License number:</i> A102372 <i>NPI:</i> 1538485586
YORGIN, PETER D <i>Provider ID:</i> 52573 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED		

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ZAGULI, MARVIN J

Provider ID: 98958
Board Certified Specialty: No
 RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN
 12036 SCRIPPS HIGHLANDS
 DR # 102
 SAN DIEGO, CA 92131-5155
Phone: (858) 566-4444
Fax:
After Hours Phone: (858)
 566-4444
Provider Gender: Male
License number: G38188
NPI: 1508837501
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Sharp
 Mary Birch Hosp For Women
 And Newborns
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZANDKARIMI, FARIBA

Provider ID: 25659
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Provider Gender: Female
License number: A46161
NPI: 1356373674
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Mercy
 General Hospital, Rady Childrens
 Hospital San Diego, Scripps
 Mercy Hospital, Scripps Mercy
 Hospital Chula Vista, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
 Family Health Center
IPA:

PHYSICAL MEDICINE / REHABILITATION

ALGRA, JEFFREY

Provider ID: 287524
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
Phone: (858) 966-8974
Fax:
After Hours Phone: (858)
 966-8974
Provider Gender: Male
License number: A121138
NPI: 1457664518
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

BIFFL, SUSAN E

Provider ID: 287453
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8974
 Fax: (858) 966-6721
 After Hours Phone: (858) 966-8974
 Provider Gender: Female
 License number: C151768
 NPI: 1366589640
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

BROWN, MACKENZIE E

Provider ID: 287516
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
 Phone: (858) 966-8974
 Fax:
 After Hours Phone: (858)
 966-8974
 Provider Gender: Female
 License number: 20A14180
 NPI: 1275812323
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

BULLOCK, ANDREW C

Provider ID: 257588
 Board Certified Specialty: No
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 1855 1ST AVE STE 200
 SAN DIEGO, CA 92101-2650
 Phone: (619) 379-6579
 Fax: (619) 501-3846
 After Hours Phone: (619)
 379-6579
 Provider Gender: Male
 License number: 20A6842
 NPI: 1295743045

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Fataleka, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

CHEN, JEFFREY L

Provider ID: 63845

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: A102762
 NPI: 1811183700
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Pomerado
 Hospital, Ucsd Medical Ctr, Ucsd
 La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DALAL, PRITHA B

Provider ID: 287523
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
 Phone: (858) 966-8974
 Fax:
 After Hours Phone: (858)
 966-8974
 Provider Gender: Female
 License number: A132097
 NPI: 1609017532
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

GAVRILYUK, OLEG M

Provider ID: 34930
Board Certified Specialty: No
 OLEG M GAVRILYUK MD PC
 6699 ALVARADO RD STE 2302
 SAN DIEGO, CA 92120-5241
Phone: (619) 578-2518
Fax:
After Hours Phone: (619)
 578-2518
Provider Gender: Male
License number: A74418
NPI: 1952496291
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA
 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, HAEWON

Provider ID: 256226
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A161567
NPI: 1447661657
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Korean
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, JOAN T

Provider ID: 243378
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 325
 SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A99391
NPI: 1447460050

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Parkview Community Hospital
 Medical Center, Childrens Hosp
 And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

MIGNOSA, ROGER J

Provider ID: 120585
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 200
 SAN DIEGO, CA 92121-2113
Phone: (858) 657-8600
Fax:
After Hours Phone: (858)
 657-8600
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIGNOSA, ROGER J

Provider ID: 203477
Board Certified Specialty: No
UCSD MEDICAL GROUP
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131-1061
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIGNOSA, ROGER J

Provider ID: 203478
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121-2113

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MIGNOSA, ROGER J

Provider ID: 286300
Board Certified Specialty: No
UCSD MEDICAL GROUP
9333 GENESEE AVE
SAN DIEGO, CA 92121-2111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A12464
NPI: 1255627691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RYAN, KYLE

Provider ID: 287520
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST # 195
SAN DIEGO, CA 92123-2771
Phone: (858) 966-8974
Fax:
After Hours Phone: (858) 966-8974
Provider Gender: Male
License number: A170177
NPI: 1447645742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCOTT-WYARD, PHOEBE R

Provider ID: 287519
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST # 195

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-2771
 Phone: (858) 966-8974
 Fax:
 After Hours Phone: (858) 966-8974
 Provider Gender: Female
 License number: 20A11699
 NPI: 1336356203
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Childrens Hosp Of Los Angeles, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SKALSKY, ANDREW J
 Provider ID: 287537
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST # 195
 SAN DIEGO, CA 92123-2771
 Phone: (858) 966-8974
 Fax:
 After Hours Phone: (858) 966-8974
 Provider Gender: Male
 License number: A90003
 NPI: 1487635272
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

THOMPSON, SHARRON L
 Provider ID: 278396
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3703 CAMINO DEL RIO S STE 210
 SAN DIEGO, CA 92108-4033
 Phone: (619) 640-5555
 Fax: (619) 640-5550
 After Hours Phone: (619) 640-5555
 Provider Gender: Female
 License number: G55454
 NPI: 1669462883
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA M

Provider ID: 243367
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR
 SAN DIEGO, CA 92121-3021
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA53570
 NPI: 1750734893
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Southwest Healthcare System Wildomar, Southwest Healthcare System Murrieta, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ALBRIGHT, KELSEY A
 Provider ID: 284763
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 923-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 923-8273
 Provider Gender: Female
 License number: PA57996
 NPI: 1235653148
 Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ALVARADO, EDMUND R

Provider ID: 115061

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Provider Gender: Male

License number: PA20888

NPI: 1720303340

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* ME

Hours: M-SA 9AM-5PM

Website: www.fhcsd.org

Email:

Medical Group(s): Logan Heights

Family Health Center

IPA:

ARMEEN, GARY P

Provider ID: 247035

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PA21505

NPI: 1760774863

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

ASARO, AMANDA M

Provider ID: 260258

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY STE

410

SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789

Fax:

After Hours Phone: (858)

966-6789

Provider Gender: Female

License number: PA18493

NPI: 1306961313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/21

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

ASARO, AMANDA M

Provider ID: 260260

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999

Fax: (858) 576-8412

After Hours Phone: (858)

966-5999

Provider Gender: Female

License number: PA18493

NPI: 1306961313

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

ASARO, AMANDA M

Provider ID: 280620
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA18493
NPI: 1306961313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BARKER, ALEXANDRA E

Provider ID: 276599
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223

Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: PA58662
NPI: 1154846012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BARKER, ALEXANDRA E

Provider ID: 276600
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123-4232
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
License number: PA58662
NPI: 1154846012
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

BAUTISTA, MARIE ANGELA M

Provider ID: 113403
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA18241
NPI: 1225258445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BEALE, EVAN J , NPA

Provider ID: 271080
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2150

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 454-4300
 Fax: (858) 454-5088
 After Hours Phone: (858) 454-4300
 Provider Gender: Male
 License number: PA55344
 NPI: 1689174146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BEALE, EVAN J , NPA

Provider ID: 271081
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 415
 SAN DIEGO, CA 92103-2121
 Phone: (619) 298-9809
 Fax: (619) 298-9823
 After Hours Phone: (619) 298-9809
 Provider Gender: Male
 License number: PA55344
 NPI: 1689174146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

BOYD, LISA N

Provider ID: 217649
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA20326
 NPI: 1871859421
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRAND, KELLY R

Provider ID: 262160
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030
 Fax: (858) 966-8032
 After Hours Phone: (858) 966-8030
 Provider Gender: Female
 License number: PA19840
 NPI: 1528215993
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/99
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BRUECKNER, TAMMIE N

Provider ID: 255558
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA57558
 NPI: 1407212376
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASTILLO, PATRICIA

Provider ID: 115068
Board Certified Specialty: No
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Female
License number: PA17220
NPI: 1376550657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA: Blue Shield Promise Health Plan Direct

CASTILLO, PATRICIA

Provider ID: 257530
Board Certified Specialty: No
BLUE SHIELD PROMISE

HEALTH PLAN DIRECT
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax:
After Hours Phone: (619) 515-2424
Provider Gender: Female
License number: PA17220
NPI: 1376550657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

CERIALE, CHRISTOPHER H

Provider ID: 269867
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 7526 CLAIREMONT MESA BLVD
 SAN DIEGO, CA 92111-1504
Phone: (888) 743-7526
Fax:
After Hours Phone: (888) 743-7526
Provider Gender: Male
License number: PA54651
NPI: 1255858221
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHAVOYA, KRISTI ROSE J

Provider ID: 279602
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: PA57744
NPI: 1821630617
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Loma Linda University Med Ctr, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CLARK, YVONNE L

Provider ID: 260062
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
Phone: (888) 996-6795
Fax:
After Hours Phone: (888) 996-6795
Provider Gender: Female
License number: PA20447
NPI: 1629302476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CORNEJO, DANIEL A
Provider ID: 265375
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Male
License number: PA57695
NPI: 1508423492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DANESHVAR, ABRAHAM D , NPA
Provider ID: 271004
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9610 GRANITE RIDGE DR STE B
 SAN DIEGO, CA 92123-2684
Phone: (858) 558-8150
Fax: (858) 346-1024
After Hours Phone: (858) 558-8150
Provider Gender: Male
License number: PA52905
NPI: 1245359140
Provider English Spoken: Yes
Provider Language(s) Spoken: Turkish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical

Group-Sd
DAVID, MARVIC T
Provider ID: 115065
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: PA53748
NPI: 1750832317
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

DENEVAN, ANDREW J
Provider ID: 83352
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: PA23100
NPI: 1811324726

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DICKINSON, ALLISON J

Provider ID: 260622
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health Network
DICKINSON, ALLISON J
Provider ID: 260623
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: PA17163
NPI: 1972655389

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DICKINSON, ALLISON J

Provider ID: 260624
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228

Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA17163
NPI: 1972655389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DODSON, EMILY E

Provider ID: 260705
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Female
License number: PA57548
NPI: 1952708695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DODSON, EMILY E

Provider ID: 285750
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
License number: PA57548
NPI: 1952708695
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DOREY, DANIELLE B

Provider ID: 286212
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: PA51652
NPI: 1578966925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

FINK, ELLEN E

Provider ID: 124646
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA52655
NPI: 1689962946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FINK, PATRICK M

Provider ID: 107145
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2444
Fax:
After Hours Phone: (619) 515-2444
Provider Gender: Male
License number: PA52704
NPI: 1922380328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-W,F 8:30AM-5:30PM, TH 9AM-6PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego-Beach Area
IPA:

FLOCO, VIRGINIA A

Provider ID: 272562
Board Certified Specialty: No
RADY CHILDRENS HEALTH

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D. Directorio de proveedores de atención especializada

NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: PA20788
NPI: 1982798112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GAIDADJIEV, TEODORA

Provider ID: 276737
Board Certified Specialty: No
UCSD MEDICAL GROUP
203 W F ST
SAN DIEGO, CA 92101-6016
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA53021
NPI: 1235502162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps

Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HAGEN, HILARY A

Provider ID: 122337
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA52034
NPI: 1174920805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Provider ID: 104629
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: PA51679
NPI: 1003221078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

HALTER, KENNETH N

Provider ID: 102100
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: PA22613
NPI: 1053745059
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAMILTON, JAMES N

Provider ID: 104629
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: PA51679
NPI: 1003221078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: PA56884 NPI: 1225698962 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
HARRIS, CHRISTINA V Provider ID: 104660 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: PA51525 NPI: 1720053846 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ♿ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	HASEGAWA, CHRIS Provider ID: 287349 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: PA56884 NPI: 1225698962 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes	HIGGINS, JOSHUA B Provider ID: 287133 Board Certified Specialty: No UCSD MEDICAL GROUP 203 W F ST SAN DIEGO, CA 92101-6016 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: PA20471 NPI: 1861624181 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
HASEGAWA, CHRIS Provider ID: 247206 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR	HOLM, TYLER A , NPA Provider ID: 241020 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9333 GENESEE AVE # 350A	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: PA55864
NPI: 1326524299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: 18/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUNTER, JACOB A
Provider ID: 287449
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA54452
NPI: 1114459765
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

KASIAN, ELIZA B
Provider ID: 262241
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Male
License number: PA52368
NPI: 1780071399
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

KRASOVIC, ERYNN E
Provider ID: 262185
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410

SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA52779
NPI: 1992173124
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAKHANPAL, SONIA
Provider ID: 110210
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA16823
NPI: 1285796458
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	NORTH PARK FAMILY HEALTH CENTERS 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2424 <i>Provider Gender:</i> Female <i>License number:</i> PA23231 <i>NPI:</i> 1245670413 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> North Park Family Health Centers <i>IPA:</i>	<i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 0/18 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network
LAMBERT, GAGE I <i>Provider ID:</i> 214788 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Male <i>License number:</i> PA53792 <i>NPI:</i> 1144672494 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	LAZAR, ANITA A <i>Provider ID:</i> 272531 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123-4232 <i>Phone:</i> (858) 309-7701 <i>Fax:</i> (858) 966-8038 <i>After Hours Phone:</i> (858) 309-7701 <i>Provider Gender:</i> Female <i>License number:</i> PA55984 <i>NPI:</i> 1609208198 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No	LEBOWITZ, STEVEN <i>Provider ID:</i> 283732 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123-4223 <i>Phone:</i> (858) 966-5818 <i>Fax:</i> (858) 966-7483 <i>After Hours Phone:</i> (858) 966-5818 <i>Provider Gender:</i> Male <i>License number:</i> PA51721 <i>NPI:</i> 1497714828 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Rady Childrens Hospital San Diego, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> 18/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i>
LAPINA, LORI L <i>Provider ID:</i> 77863 <i>Board Certified Specialty:</i> No		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Rady Childrens Health Network

LINDEMANN, CHRISTINA R

Provider ID: 283760
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121-3069
Phone: (800) 926-8273
Fax: (858) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA57053
NPI: 1194373514
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LONGOBARDO, FRANCESCA A , NPA

Provider ID: 241372
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: PA52844
NPI: 1407224157

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MCADAMS, JOSEPH

Provider ID: 280611
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PA58420
NPI: 1104371251
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MCCAULEY, KRISTINA R
Provider ID: 262245
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
License number: PA52100
NPI: 1063819944
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/99
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MCCLAFFERTY, STEPHANIE N

Provider ID: 262297
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax:
After Hours Phone: (858) 966-6795
Provider Gender: Female
License number: PA52575

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1609209238
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MERCER, KELLY C
 Provider ID: 257506
 Board Certified Specialty: No
 BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT
 5671 BALBOA AVE
 SAN DIEGO, CA 92111-2705
 Phone: (858) 800-2880
 Fax:
 After Hours Phone: (858)
 800-2880
 Provider Gender: Female
 License number: PA21625
 NPI: 1154609790
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Blue Shield Promise Health
 Plan Direct

MERRILL, COREY M
 Provider ID: 258040
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: PA56995
 NPI: 1386032308
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MUNCH, LINH D
 Provider ID: 260085
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858)
 966-6789
 Provider Gender: Female
 License number: PA14223

NPI: 1679792725
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

MUNCH, LINH D
 Provider ID: 260086
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
 Phone: (858) 966-9360
 Fax: (858) 966-8519
 After Hours Phone: (858)
 966-9360
 Provider Gender: Female
 License number: PA14223
 NPI: 1679792725
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health Network

MUNCH, LINH D

Provider ID: 260087
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: PA14223
NPI: 1679792725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NAKAMITSU, ABIGAIL L

Provider ID: 268666
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232

Phone: (858) 966-6789
Fax: (858) 966-8519
After Hours Phone: (858) 966-6789
Provider Gender: Female
License number: PA22344
NPI: 1932459179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NASSAR, JEANNE A

Provider ID: 112529
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: PA21089
NPI: 1760704761
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NELMS, MICHAEL J , NPA

Provider ID: 242771
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121
Phone: (619) 298-9809
Fax:
After Hours Phone: (619) 298-9809
Provider Gender: Male
License number: PA14379
NPI: 1235113580
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NELMS, MICHAEL J

Provider ID: 36201
Board Certified Specialty: Yes
WEST DERMATOLOGY AND SURG MED GRP
4060 4TH AVE STE 415
SAN DIEGO, CA 92103-2121

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 298-9809
 Fax:
 After Hours Phone: (619) 298-9809
 Provider Gender: Male
 License number: PA14379
 NPI: 1235113580
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

NGUYEN, CECILIA

Provider ID: 289157
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6795
 Fax: (858) 966-7479
 After Hours Phone: (858) 966-6795
 Provider Gender: Female
 License number: PA57419
 NPI: 1629636816
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

O'MARA, ROBERT J

Provider ID: 80431
 Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax:

After Hours Phone: (619) 515-2424
 Provider Gender: Male
 License number: PA14526
 NPI: 1336174382
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): North Park Family Health Centers
 IPA:

CONNOR, ALYSON B

Provider ID: 262343
 Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-5999
 Fax: (858) 966-8394
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: PA55497
 NPI: 1053855239
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

PAIK, CHRISTINA N

Provider ID: 262428
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Female
 License number: PA21680
 NPI: 1174811475
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

PAIK, CHRISTINA N

Provider ID: 262429
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858)
 966-9360
Provider Gender: Female
License number: PA21680
NPI: 1174811475
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

PERREAULT, MARK R

Provider ID: 283585
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: PA57736
NPI: 1356749451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

PERREAULT, MARK R

Provider ID: 283586
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: PA57736
NPI: 1356749451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

PRIEST, VIVIAN N

Provider ID: 272430
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: PA55483
NPI: 1225581754
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

QUICK, ELISABETH A

Provider ID: 87611
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

DTFHC AT CONNECTIONS
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2430
Fax:
After Hours Phone: (619)
515-2430
Provider Gender: Female
License number: PA21591
NPI: 1790055010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAI, GEORGINA

Provider ID: 270053
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
7526 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111-1504
Phone: (858) 743-7526
Fax:
After Hours Phone: (858)
743-7526
Provider Gender: Female
License number: PA54629
NPI: 1467974915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REYES, SALLIE J

Provider ID: 288616
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858)
309-7701
Provider Gender: Female
License number: PA54464
NPI: 1134657653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

RIDGWAY, CATHERINE A

Provider ID: 110465
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: PA17175
NPI: 1184887408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANCHEZ, RAQUEL

Provider ID: 262626
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
410
SAN DIEGO, CA 92123-4228
Phone: (858) 966-6789
Fax:
After Hours Phone: (858)
966-6789
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANCHEZ, RAQUEL

Provider ID: 262627
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 190
 SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858) 966-9360
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANCHEZ, RAQUEL

Provider ID: 262628
Board Certified Specialty: No
RADY CHILDRENS HEALTH

NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 567-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: PA14357
NPI: 1356560650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHELLIE, SCOTT A

Provider ID: 109933
Board Certified Specialty: No
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
 1550 BROADWAY # 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2525
Fax:
After Hours Phone: (619) 515-2525
Provider Gender: Male
License number: PA53288
NPI: 1699053843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-F 8:30AM-5:30PM, SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Family Hlth Ctr San Diego- City College
IPA:

SCHMITT, EVA V

Provider ID: 264174
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 140
 SAN DIEGO, CA 92123-2712
Phone: (858) 966-6710
Fax: (858) 966-6266
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHMITT, EVA V

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider ID: 264175
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHMITT, EVA V
Provider ID: 264176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-8800
Fax: (858) 966-7433
After Hours Phone: (858) 966-8800
Provider Gender: Female
License number: PA19324
NPI: 1174715106
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

SCHMITT, EVA V
Provider ID: 69390
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
7910 FROST ST STE 430
SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Female
License number: PA19324
NPI: 1174715106

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Rady Childrens Health
Network

SCHROEDER, JENNIFER K
Provider ID: 124617
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR
SAN DIEGO, CA 92121-3021
Phone: (858) 453-1792
Fax:
After Hours Phone: (858) 453-1792
Provider Gender: Female
License number: PA19644
NPI: 1780851253
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHROEDER, JENNIFER K
Provider ID: 256639
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (858) 453-1469
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PA19644
NPI: 1780851253
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Male License number: PA21712 NPI: 1316102163 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
SCHROEDER, JENNIFER K Provider ID: 256640 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR SAN DIEGO, CA 92121-3018 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: PA19644 NPI: 1780851253 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	SHAPIRO, RACHEL M Provider ID: 110912 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: PA52539 NPI: 1720488836 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: No	SHAUL, SHERA M Provider ID: 247974 Board Certified Specialty: No UCSD MEDICAL GROUP 4520 EXECUTIVE DR STE 111 SAN DIEGO, CA 92121-3019 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Female License number: PA56786 NPI: 1336659507 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
SCHULZ, STEFAN K Provider ID: 243419 Board Certified Specialty: No		STALLINGS, ANDREA M Provider ID: 101021 Board Certified Specialty: No UCSD MEDICAL GROUP 4168 FRONT ST SAN DIEGO, CA 92103-2030

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D. Directorio de proveedores de atención especializada

Phone: (619) 543-6248

Fax:

After Hours Phone: (619)
543-6248

Provider Gender: Female

License number: PA16540

NPI: 1972595478

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

STALLINGS, ANDREA M

Provider ID: 255913

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST

SAN DIEGO, CA 92103-2108

Phone: (619) 543-7496

Fax:

After Hours Phone: (619)
543-7496

Provider Gender: Female

License number: PA16540

NPI: 1972595478

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TESFAI, HELEN S

Provider ID: 287372

Board Certified Specialty: No

UCSD MEDICAL GROUP

4168 FRONT ST

SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

License number: PA54848

NPI: 1942724042

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TRAUTMAN, AMY L

Provider ID: 104652

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: PA51673

NPI: 1235412503

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TREUNER, JULIE A

Provider ID: 47986

Board Certified Specialty: No

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Provider Gender: Female

License number: PA17478

NPI: 1922013614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
 Family Health Center
IPA:

UPTON, JACQUELINE M

Provider ID: 84938
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: PA21933
NPI: 1295704328
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

VARGAS, ROBERT M

Provider ID: 25717
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY
 HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Provider Gender: Male
License number: PA11194
NPI: 1972528081
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Logan Heights
 Family Health Center
IPA:

VILLAPANDO, NORMA O

Provider ID: 264057
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 4
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858)
 966-6795
Provider Gender: Female
License number: PA56098
NPI: 1376947960
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):

No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

WAX, PLUMMER L

Provider ID: 84960
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: PA15657
NPI: 1376741934
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

WEIR, JACQUELINE R

Provider ID: 278200
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA21646
 NPI: 1932494499
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WEIR, JACQUELINE R

Provider ID: 278201
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
 Phone: (800) 925-8271
 Fax: (888) 539-8781
 After Hours Phone: (800) 925-8271
 Provider Gender: Female
 License number: PA21646
 NPI: 1932494499
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WEIR, JACQUELINE R

Provider ID: 278203
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9909 MIRA MESA BLVD STE 200
 SAN DIEGO, CA 92131-1061
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PA21646
 NPI: 1932494499
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

Provider ID: 278201
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
 Phone: (800) 925-8271
 Fax: (888) 539-8781
 After Hours Phone: (800) 925-8271
 Provider Gender: Female
 License number: PA21646
 NPI: 1932494499
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WITT, CHRISTOPHER

Provider ID: 110202

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: PA19586
 NPI: 1982675708
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

YIP, JACKIE

Provider ID: 122807
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY HEALTH CENTERS INC
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Female
 License number: PA20996
 NPI: 1558676171
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): City Heights Family Health Centers Inc
IPA:

ZANZUCCHI, AUDREY E

Provider ID: 253253
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-7777
Fax:
After Hours Phone: (619) 543-7777
Provider Gender: Female
License number: PA54479
NPI: 1265960256
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PODIATRIST

COLLINS, MICHAEL L

Provider ID: 108897
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: DPM5146
NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

COLLINS, MICHAEL L

Provider ID: 269866
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE # 350A
SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: DPM5146

NPI: 1912294711
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FORG, PATRICIA L

Provider ID: 270062
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3989 32ND ST
SAN DIEGO, CA 92104-2001
Phone: (619) 283-2097
Fax: (619) 860-1289
After Hours Phone: (619) 283-2097
Provider Gender: Female
License number: DPM3775
NPI: 1962517508
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FOYGELMAN, ALEKSANDR

Provider ID: 270221
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4440 EUCLID AVE
 SAN DIEGO, CA 92115-4522
Phone: (619) 281-3338
Fax: (844) 229-9092
After Hours Phone: (619) 281-3338
Provider Gender: Male
License number: DPM4387
NPI: 1265574669
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Bulgarian, Hebrew, Russian, Spanish, Ukrainian
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MILLER, GLENN A

Provider ID: 34542
Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2300
Fax: (619) 269-0053
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcscd.org
Email:
Medical Group(s): Logan Heights Family Health Center
IPA:

MILLER, GLENN A

Provider ID: 39393
Board Certified Specialty: No
 NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2300
Fax: (619) 685-8317
After Hours Phone: (619) 515-2300
Provider Gender: Male
License number: DPM3584
NPI: 1164457966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

♿ *Accessibility:* P, EB, IB, E, R, T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcscd.org
Email:
Medical Group(s): North Park Family Health Centers
IPA:

QUINN, MICHAEL H

Provider ID: 66301
Board Certified Specialty: No
 CALIFORNIA ORTHOPAEDIC INST MED ASSOCS INC
 7485 MISSION VALLEY RD STE 104A
 SAN DIEGO, CA 92108-4422
Phone: (619) 291-8930
Fax: (619) 291-8491
After Hours Phone: (619) 291-8930
Provider Gender: Male
License number: DPM4132
NPI: 1417918475
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8:30AM-5PM, SA 9AM-5PM
Website: califortho.com
Email:
Medical Group(s):
IPA:

SABET, PAYMANEH SALEHIAN

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D. Directorio de proveedores de atención especializada

Provider ID: 110901
Board Certified Specialty: No
UCSD EMERG PHYSICIANS
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: DPM5073
NPI: 1437474442
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA X

Provider ID: 86049
Board Certified Specialty: No
**LINDA VISTA HEALTH CARE
CTR**
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858)
279-0925
Provider Gender: Female

License number: A93812
NPI: 1508912130
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Mary
 Birch Hosp For Women And
 Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, R,
 T, W
Hours: M-F 8:30AM-5:30PM, SA
 9AM-5PM
Website: www.sdfamilycare.org
Email:
Medical Group(s): Linda Vista
 Health Care Ctr
IPA:

PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER

SIETSMA, ALEXANDRA

Provider ID: 276908
Board Certified Specialty: No
UCSD MEDICAL GROUP
350 DICKINSON ST
SAN DIEGO, CA 92103-1913
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95002705
NPI: 1932522778
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SIETSMA, ALEXANDRA

Provider ID: 276909
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: NP95002705
NPI: 1932522778
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PUBLIC HEALTH PREVENTATIVE MEDICINE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SOZANSKI, JESSE

Provider ID: 200925
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 9333 GENESEE AVE STE 200
 SAN DIEGO, CA 92121-2113
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A139018
NPI: 1437446622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AFSHAR, KAMYAR

Provider ID: 102312
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (858) 355-5864
Fax: (858) 657-6171
After Hours Phone: (858)
 355-5864
Provider Gender: Male
License number: 20A8875
NPI: 1407050669
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AKUTHOTA, PRAVEEN

Provider ID: 102052
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: C137976
NPI: 1396704698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PULMONARY DISEASES

AFSHAR, KAMYAR

Provider ID: 102305
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: 20A8875
NPI: 1407050669

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

AKUTHOTA, PRAVEEN

Provider ID: 102053
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR # 2
 SAN DIEGO, CA 92121-3018
Phone: (855) 355-5864
Fax: (858) 657-6171
After Hours Phone: (855)
 355-5864
Provider Gender: Male
License number: C137976
NPI: 1396704698
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DEVEREAUX, ASHA V

Provider ID: 112518
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 2
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-5415
Fax:
After Hours Phone: (619) 543-5415
Provider Gender: Female
License number: A51614
NPI: 1154392421
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELMARAACHLI, WAEI

Provider ID: 83405
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-7107
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A106280
NPI: 1366468969
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ELMARAACHLI, WAEI

Provider ID: 83408
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax: (858) 657-7107
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: A106280
NPI: 1366468969

Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FEDULLO, PETER F

Provider ID: 63903
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G41977
NPI: 1427073683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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D. Directorio de proveedores de atención especializada

FERNANDES, TIMOTHY M <i>Provider ID: 83429</i> <i>Board Certified Specialty: Yes</i> UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone: (619) 543-6222</i> <i>Fax: (858) 657-7107</i> <i>After Hours Phone: (619) 543-6222</i> <i>Provider Gender: Male</i> <i>License number: A112514</i> <i>NPI: 1669680757</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>Medical Group(s):</i> <i>IPA:</i> HEPOKOSKI, MARK L <i>Provider ID: 122042</i> <i>Board Certified Specialty: No</i> UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone: (855) 355-5864</i> <i>Fax:</i> <i>After Hours Phone: (855) 355-5864</i> <i>Provider Gender: Male</i> <i>License number: A125984</i> <i>NPI: 1649408790</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsd Medical Ctr</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
FUSTER, MARK M <i>Provider ID: 63911</i> <i>Board Certified Specialty: No</i> UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone: (619) 543-6222</i> <i>Fax:</i> <i>After Hours Phone: (619) 543-6222</i> <i>Provider Gender: Male</i> <i>License number: G80544</i> <i>NPI: 1972537025</i>	GUPTA, NAVEEN <i>Provider ID: 92099</i> <i>Board Certified Specialty: No</i> UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone: (855) 355-5864</i> <i>Fax:</i> <i>After Hours Phone: (855) 355-5864</i> <i>Provider Gender: Male</i> <i>License number: A81440</i> <i>NPI: 1013015569</i> <i>Provider English Spoken: Yes</i> <i>Provider Language(s) Spoken:</i> <i>Cultural Competency: No</i> <i>Hospital Affiliation: Ucsf Mount Zion, Scripps Green Hospital, Medical Ctr At Ucsf, Ucsd Medical Ctr, Regional Medical Ctr Of San Jose</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: None</i> <i>American Sign Language (ASL): No</i> <i>♿ Accessibility: W</i> <i>Hours: M-SA 9AM-5PM</i> <i>Website:</i> <i>Email:</i>	HUGHSON, WILLIAM G <i>Provider ID: 64327</i> <i>Board Certified Specialty: No</i> UCSD MEDICAL GROUP 330 LEWIS ST SAN DIEGO, CA 92103-2108 <i>Phone: (619) 471-9260</i> <i>Fax:</i> <i>After Hours Phone: (619) 471-9260</i> <i>Provider Gender: Male</i> <i>License number: G38693</i> <i>NPI: 1467519579</i>

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IBRAHIM, ISLAM M

Provider ID: 64578
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-6303
Fax:
After Hours Phone: (619) 543-6303
Provider Gender: Male
License number: C54272
NPI: 1962586917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Long Beach Memorial Med Ctr, Temecula Valley Hospital Inc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:
JOSHUA, JISHA K
Provider ID: 238061
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE P2
 SAN DIEGO, CA 92121-3028
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144956
NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JOSHUA, JISHA K

Provider ID: 238062
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A144956

NPI: 1023436417
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Malayalam
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LE, HUAN A , MD

Provider ID: 27358
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5507 EL CAJON BLVD # C
 SAN DIEGO, CA 92115-3624
Phone: (619) 582-1448
Fax: (619) 582-1081
After Hours Phone: (619) 582-1448
Provider Gender: Male
License number: A76373
NPI: 1780797381
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 16/99
American Sign Language (ASL): No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

LI, JINGHONG

Provider ID: 83699
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858) 657-7125
Provider Gender: Female
License number: A107000
NPI: 1619014479
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LONGORIA, JAVIER A

Provider ID: 118849
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A115684
NPI: 1538397765
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: University Of California Irvine Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOREDO, JOSE S

Provider ID: 64348
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: G67450
NPI: 1891728531
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAGANA, MARISA M

Provider ID: 65372
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-7105
Fax:
After Hours Phone: (858) 657-7105
Provider Gender: Female
License number: A94464
NPI: 1194856286
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MALHOTRA, ATUL

Provider ID: 83977
Board Certified Specialty: No
UCSD MEDICAL GROUP

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9260
Fax:
After Hours Phone: (619) 471-9260
Provider Gender: Male
License number: C55949
NPI: 1982695169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MALHOTRA, ATUL

Provider ID: 83978
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-6485
Fax: (858) 657-7107
After Hours Phone: (858) 657-6485
Provider Gender: Male
License number: C55949
NPI: 1982695169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MANDEL, JESS

Provider ID: 64608
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (619) 543-6248
Fax:
After Hours Phone: (619) 543-6248
Provider Gender: Male
License number: C52434
NPI: 1023006970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MORRIS, TIMOTHY A

Provider ID: 64618
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 543-2793
Fax: (619) 543-3384
After Hours Phone: (619) 543-2793
Provider Gender: Male
License number: G71499
NPI: 1134206709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAPAMATHEAKIS, DEMOSTHENES G

Provider ID: 64625
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (855) 355-5864
Fax: (619) 543-7352
After Hours Phone: (855) 355-5864
Provider Gender: Male
License number: A101188
NPI: 1326168600
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Greek
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Southwest Healthcare

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

System Wildomar, Southwest
Healthcare System Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

POCH, DAVID S

Provider ID: 64140
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6303
Fax: (858) 657-7107
After Hours Phone: (619)
543-6303
Provider Gender: Male
License number: A107956
NPI: 1598955668
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RAMNATH, VENKTESH R

Provider ID: 114336

Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858)
657-8860
Provider Gender: Male
License number: A107714
NPI: 1215911730
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Temecula
Valley Hospital Inc, Southwest
Healthcare System Murrieta,
Southwest Healthcare System
Wildomar, El Centro Regional
Medical Center, Ucsd Medical
Ctr, Healdsburg District Hosp,
Providence Redwood Memorial
Hospital, Ucsd La Jolla John
Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RIES, ANDREW L

Provider ID: 64634
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (619) 543-6248
Fax:
After Hours Phone: (619)
543-6248
Provider Gender: Male
License number: G33984
NPI: 1225088214
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIKER, DAVID R

Provider ID: 122563
Board Certified Specialty: No
NR MEDICAL ASSOCIATES
555 WASHINGTON ST
SAN DIEGO, CA 92103-2289
Phone: (619) 250-8300
Fax:
After Hours Phone: (619)
250-8300
Provider Gender: Male
License number: C53916
NPI: 1164405528
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Alvarado Hospital Llc, Vibra
Hospital Of San Diego, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SOLER TOMAS, XAVIER

Provider ID: 64651
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (855) 355-5864
Fax:
After Hours Phone: (855) 355-5864
Provider Gender: Male
License number: A140707
NPI: 1962738641
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation: El Centro Regional Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNWOO, BERNIE Y

Provider ID: 118881
Board Certified Specialty: No
 UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Female
License number: A138242
NPI: 1336294107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SUNWOO, BERNIE Y

Provider ID: 118885
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A138242
NPI: 1336294107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

YUNG, GORDON L

Provider ID: 64669
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST
 SAN DIEGO, CA 92103-2030
Phone: (619) 543-7300
Fax: (619) 543-7334
After Hours Phone: (619) 543-7300
Provider Gender: Male
License number: A54237
NPI: 1134145949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA:	Phone: (858) 549-7400	Cultural Competency: No
	Fax:	Hospital Affiliation: Rady
RADIATION ONCOLOGY	After Hours Phone: (858)	Childrens Hospital San Diego
	549-7400	Medi-Cal Open Panel: Yes
BRUGGEMAN, ANDREW R , MD	Provider Gender: Male	Min/Max Age: 0/999
Provider ID: 271007	License number: A85308	American Sign Language (ASL): No
Board Certified Specialty: No	NPI: 1255513859	Accessibility: ☯
COMMUNITY CARE IPA LLC	Provider English Spoken: Yes	Hours: M-SA 9AM-5PM
16918 DOVE CANYON RD STE 103	Provider Language(s) Spoken: Spanish	Website:
SAN DIEGO, CA 92127-3455	Cultural Competency: No	Email:
Phone: (858) 649-5100	Hospital Affiliation: Cecil H And	Medical Group(s):
Fax: (858) 649-5099	Ida M Green Hosp Of Scripps	IPA: Rady Childrens Health
After Hours Phone: (858)	Clin, Rady Childrens Hospital	Network
649-5100	San Diego, Scripps Green	
Provider Gender: Male	Hospital, Scripps Memorial	
License number: A126549	Hospital	
NPI: 1790049591	Medi-Cal Open Panel: No	
Provider English Spoken: Yes	Min/Max Age: 0/18	
Provider Language(s) Spoken:	American Sign Language (ASL): No	
Cultural Competency: No	Accessibility: ☯	
Hospital Affiliation: Ucsd La Jolla	Hours: M-SA 9AM-5PM	
John Sally Thornton, Ucsd	Website:	
Medical Ctr	Email:	
Medi-Cal Open Panel: Yes	Medical Group(s):	
Min/Max Age: 0/120	IPA: Rady Childrens Health	
American Sign Language (ASL): No	Network	
Accessibility: ☯		
Hours: M-SA 9AM-5PM	CHOI, JEHEE I	
Website:	Provider ID: 206125	
Email:	Board Certified Specialty: No	
Medical Group(s):	RADY CHILDRENS HEALTH	
IPA: Community Care Ipa Llc,	NETWORK	
Ucsd Medical Group	9730 SUMMERS RIDGE RD	
	SAN DIEGO, CA 92121-3101	
	Phone: (858) 549-7458	
	Fax:	
CHANG, ANDREW L	After Hours Phone: (858)	
Provider ID: 205679	549-7458	
Board Certified Specialty: No	Provider Gender: Female	
RADY CHILDRENS HEALTH	License number: A131202	
NETWORK	NPI: 1619260056	
9730 SUMMERS RIDGE RD	Provider English Spoken: Yes	
SAN DIEGO, CA 92121-3101	Provider Language(s) Spoken:	

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

DAVIS, STEVEN W

Provider ID: 289134
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101
Phone: (858) 345-2445
Fax: (858) 578-1144
After Hours Phone: (858) 345-2445
Provider Gender: Male
License number: A82145
NPI: 1558463653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

DEWITT, KELLY D , MD

Provider ID: 220045
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123-2773
Phone: (858) 939-5010
Fax:
After Hours Phone: (858) 939-5010

Provider Gender: Female
License number: A74873
NPI: 1184668741
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Palomar Health Downtown Campus, Palomar Medical Center, Sharp Chula Vista Med Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FULLER, DONALD B , MD

Provider ID: 269236
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
2466 1ST AVE # B
SAN DIEGO, CA 92101-1480
Phone: (619) 230-0400
Fax: (619) 325-3688
After Hours Phone: (619) 230-0400
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado

Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FULLER, DONALD B , MD

Provider ID: 269238
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax:
After Hours Phone: (858) 505-4100
Provider Gender: Male
License number: G62532
NPI: 1285632711
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Sharp Memorial Hospital, Scripps Mercy Hospital, Alvarado
Hospital Llc, Scripps Memorial Hospital, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

HATTANGADI GLUTH, JONA A , MD

Provider ID: 254496

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559) 447-4949

Provider Gender: Female

License number: A122308

NPI: 1467625491

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HATTANGADI GLUTH, JONA A

Provider ID: 262270

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559) 447-4949

Provider Gender: Female

License number: A122308

NPI: 1467625491

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HOOPES, DAVID J

Provider ID: 262206

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559) 447-4949

Provider Gender: Male

License number: C128063

NPI: 1962520080

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HOOPES, DAVID J , MD

Provider ID: 269725

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE 103

SAN DIEGO, CA 92127-3455

Phone: (559) 447-4949

Fax: (559) 447-4925

After Hours Phone: (559) 447-4949

Provider Gender: Male

License number: C128063

NPI: 1962520080

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

IJAZ, TAHIR, MD

Provider ID: 269245

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338

Phone: (858) 505-4100

Fax: (858) 429-7939

After Hours Phone: (858)
505-4100

Provider Gender: Male

License number: A52748

NPI: 1225036742

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: St Agnes

Medical Center, Alvarado

Hospital Llc, Paradise Valley

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Sharp

Memorial Hospital, Scripps

Memorial Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

IJAZ, TAHIR, MD

Provider ID: 269246

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3366 5TH AVE
SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A52748

NPI: 1225036742

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: St Agnes

Medical Center, Alvarado

Hospital Llc, Paradise Valley

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Sharp

Memorial Hospital, Scripps

Memorial Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

IJAZ, TAHIR

Provider ID: 55269

Board Certified Specialty: No
GENESIS HEALTHCARE

PARTNERS PC

3366 5TH AVE

SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)

230-0400

Provider Gender: Male

License number: A52748

NPI: 1225036742

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: St Agnes

Medical Center, Alvarado

Hospital Llc, Paradise Valley

Hospital, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Sharp

Memorial Hospital, Scripps

Memorial Hospital, Scripps

Mercy Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-F 8AM-5PM, SA

9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

JABBARI, SIAVASH, MD

Provider ID: 268784

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3075 HEALTH CENTER DR # 0
LEVEL

SAN DIEGO, CA 92123-2773

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)

939-5010

Provider Gender: Male

License number: A99269

NPI: 1720314107

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp Chula Vista Med Ctr, Grossmont Hospital, Sharp Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MACEWAN, IAIN J

Provider ID: 206088

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

9730 SUMMERS RIDGE RD
SAN DIEGO, CA 92121-3101

Phone: (858) 549-7458

Fax: (858) 578-1144

After Hours Phone: (858) 549-7458

Provider Gender: Male

License number: A129079

NPI: 1326300401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Rady Childrens Health Network,
Ucsd Medical Group

MACEWAN, IAIN J , MD

Provider ID: 255730

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax:

After Hours Phone: (858) 649-5100

Provider Gender: Male

License number: A129079

NPI: 1326300401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Rady Childrens Health Network,
Ucsd Medical Group

MAYADEV, JYOTI S , MD

Provider ID: 256153

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858) 649-5100

Provider Gender: Female

License number: A109372

NPI: 1902906902

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Uc Davis
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/120

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

MAYADEV, JYOTI S

Provider ID: 262219

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858) 649-5100

Provider Gender: Female

License number: A109372

NPI: 1902906902

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> Uc Davis Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Group-Sd MELL, LOREN K <i>Provider ID:</i> 262153 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (559) 447-4949 <i>Fax:</i> (559) 447-4925 <i>After Hours Phone:</i> (559) 447-4949 <i>Provider Gender:</i> Male <i>License number:</i> A104704 <i>NPI:</i> 1316119704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Phone:</i> (559) 447-4949 <i>Fax:</i> (559) 447-4925 <i>After Hours Phone:</i> (559) 447-4949 <i>Provider Gender:</i> Male <i>License number:</i> A105348 <i>NPI:</i> 1730382631 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd
MELL, LOREN K , MD <i>Provider ID:</i> 255893 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (559) 447-4949 <i>Fax:</i> (559) 447-4925 <i>After Hours Phone:</i> (559) 447-4949 <i>Provider Gender:</i> Male <i>License number:</i> A104704 <i>NPI:</i> 1316119704 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical	MURPHY, JAMES D <i>Provider ID:</i> 262401 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455	MURPHY, KEVIN T , MD <i>Provider ID:</i> 242618 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A82350 <i>NPI:</i> 1730104167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Sharp Memorial Hospital, Ucsd Medical Ctr,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Palomar Health Downtown Campus, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	<i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A142735 <i>NPI:</i> 1518250869 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
MURPHY, KEVIN T <i>Provider ID:</i> 262179 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A82350 <i>NPI:</i> 1730104167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Palomar Medical Center, Sharp Memorial Hospital, Ucsd Medical Ctr, Palomar Health Downtown Campus, Rady Childrens Hospital San Diego <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No	PEJAVAR, SUNANDA M , MD <i>Provider ID:</i> 221077 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123-2773 <i>Phone:</i> (858) 939-5010 <i>Fax:</i> <i>After Hours Phone:</i> (858) 939-5010 <i>Provider Gender:</i> Female <i>License number:</i> A103733 <i>NPI:</i> 1912232513 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Kannada, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 19/100 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	ROSE, BRENT S , MD <i>Provider ID:</i> 256307 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 <i>Phone:</i> (858) 649-5100 <i>Fax:</i> (858) 649-5099 <i>After Hours Phone:</i> (858) 649-5100 <i>Provider Gender:</i> Male <i>License number:</i> A142735 <i>NPI:</i> 1518250869 <i>Provider English Spoken:</i> Yes
ROSE, BRENT S <i>Provider ID:</i> 125050 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/120 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network SANDHU, AJAY P , MD Provider ID: 247978 Board Certified Specialty: No COMMUNITY CARE IPA LLC 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (559) 447-4949 Fax: (559) 447-4925 After Hours Phone: (559) 447-4949 Provider Gender: Male License number: A69947 NPI: 1881610137 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (559) 447-4949 Fax: (559) 447-4925 After Hours Phone: (559) 447-4949 Provider Gender: Male License number: A69947 NPI: 1881610137 Provider English Spoken: Yes Provider Language(s) Spoken: Hindi Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
ROSSI, CARL J Provider ID: 289131 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9730 SUMMERS RIDGE RD # 101 SAN DIEGO, CA 92121-3101 Phone: (858) 345-2445 Fax: (858) 578-1144 After Hours Phone: (858) 345-2445 Provider Gender: Male License number: G66352 NPI: 1518983055 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Scripps Green Hospital, Rady Childrens Hospital San Diego, Scripps Memorial Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL): No ♿ Accessibility:	Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd SANDHU, AJAY P Provider ID: 262196 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS	SANGHVI, PARAG R Provider ID: 206140 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 9730 SUMMERS RIDGE RD SAN DIEGO, CA 92121-3101 Phone: (858) 549-7458 Fax: (858) 578-1144 After Hours Phone: (858) 549-7458 Provider Gender: Male License number: A105184 NPI: 1801005152

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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd, Rady Childrens
 Health Network

SANGHVI, PARAG R , MD

Provider ID: 248043
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD
 SAN DIEGO, CA 92127-3445
Phone: (858) 309-6585
Fax:
After Hours Phone: (858)
 309-6585
Provider Gender: Male
License number: A105184
NPI: 1801005152
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd, Rady Childrens
 Health Network

SANGHVI, PARAG R

Provider ID: 262323
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 16918 DOVE CANYON RD # 3
 SAN DIEGO, CA 92127-3445
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559)
 447-4949
Provider Gender: Male
License number: A105184
NPI: 1801005152
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd, Rady Childrens
 Health Network

SANGHVI, PARAG R , MD

Provider ID: 270039
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD STE
 103
 SAN DIEGO, CA 92127-3455
Phone: (858) 309-6585
Fax: (858) 309-6593
After Hours Phone: (858)
 309-6585
Provider Gender: Male
License number: A105184
NPI: 1801005152
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Childrens
 Hosp And Resrch Ctr At
 Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd, Rady Childrens
 Health Network

SANGHVI, PARAG R , MD

Provider ID: 270040

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
Phone: (858) 549-7400
Fax: (858) 578-1144
After Hours Phone: (858) 549-7400
Provider Gender: Male
License number: A105184
NPI: 1801005152
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp And Resrch Ctr At Oakland, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd, Rady Childrens Health Network

SHARABI, ANDREW B , MD
Provider ID: 257024
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100

Provider Gender: Male
License number: A136977
NPI: 1043531213
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SHARABI, ANDREW B
Provider ID: 262164
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 16918 DOVE CANYON RD STE 103
 SAN DIEGO, CA 92127-3455
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
License number: A136977
NPI: 1043531213
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SHIRAZI, REZA
Provider ID: 121532
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 5395 RUFFIN RD STE 103
 SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax:
After Hours Phone: (858) 505-4100
Provider Gender: Male
License number: A95800
NPI: 1336175272
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital, Alvarado Hospital Llc, Scripps Green Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Community Care Ipa Llc

SHIRAZI, REZA, MD

Provider ID: 269249

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338

Phone: (858) 505-4100

Fax: (858) 429-7939

After Hours Phone: (858)
505-4100

Provider Gender: Male

License number: A95800

NPI: 1336175272

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Scripps Memorial

Hospital Encinitas, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Scripps

Mercy Hospital, Alvarado

Hospital Llc, Scripps Green

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHIRAZI, REZA, MD

Provider ID: 269250

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

3366 5TH AVE
SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A95800

NPI: 1336175272

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Scripps Memorial

Hospital Encinitas, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Scripps

Mercy Hospital, Alvarado

Hospital Llc, Scripps Green

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHIRAZI, REZA

Provider ID: 66092

Board Certified Specialty: No
GENESIS HEALTHCARE

PARTNERS PC

3366 5TH AVE

SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400

Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

License number: A95800

NPI: 1336175272

Provider English Spoken: Yes

Provider Language(s) Spoken:
Farsi, Persian, Spanish

Cultural Competency: No

Hospital Affiliation: Pomerado

Hospital, Scripps Memorial

Hospital Encinitas, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital, Scripps

Mercy Hospital, Alvarado

Hospital Llc, Scripps Green

Hospital, Sharp Memorial

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-F 8AM-5PM, SA
9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SIMPSON, DANIEL R , MD

Provider ID: 256193

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

16918 DOVE CANYON RD STE
103

SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)

649-5100

Provider Gender: Male

License number: A118377

NPI: 1689974883

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes Min/Max Age: 16/122 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Group-Sd UHL, BARRY M , MD Provider ID: 243528 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123-2773 Phone: (858) 939-5010 Fax: (858) 939-5021 After Hours Phone: (858) 939-5010 Provider Gender: Male License number: A71969 NPI: 1811936693 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Palomar Health Downtown Campus, Palomar Medical Center, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 19/100 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	Phone: (858) 939-5010 Fax: After Hours Phone: (858) 939-5010 Provider Gender: Male License number: A86307 NPI: 1225186232 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Sharp Memorial Hospital, Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 19/100 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
SIMPSON, DANIEL R Provider ID: 262134 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127-3455 Phone: (858) 649-5100 Fax: (858) 649-5099 After Hours Phone: (858) 649-5100 Provider Gender: Male License number: A118377 NPI: 1689974883 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No ♿ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical	VOLPP, PAUL B , MD Provider ID: 221105 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123-2773	WEINSTEIN, GEOFFREY D , MD Provider ID: 220039 Board Certified Specialty: No COMMUNITY CARE IPA LLC 3075 HEALTH CENTER DR SAN DIEGO, CA 92123-2773 Phone: (858) 939-5010 Fax: (858) 939-5021 After Hours Phone: (858) 939-5010 Provider Gender: Male License number: A54109 NPI: 1841233947 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Palomar Health Downtown Campus, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 19/100
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY DIAGNOSTIC X-RAY

AGANOVIC, LEJLA

Provider ID: 114044
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Female
License number: A101098
NPI: 1003807652
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
ALLEN, DERRICK R
Provider ID: 115873
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A69840
NPI: 1215982970

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R

Provider ID: 125982
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906

Phone: (619) 299-2299
Fax: (619) 229-2288
After Hours Phone: (619) 299-2299
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268354
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1809 NATIONAL AVE # 2104
 SAN DIEGO, CA 92113-2113
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268355
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (888) 685-4016
Fax: (866) 558-4329
After Hours Phone: (888) 685-4016
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 268357
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALQAHTANI, EMAN N

Provider ID: 126409
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A138391
NPI: 1104169564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANDERSON, GREGORY S

Provider ID: 115874
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax:
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ANDERSON, GREGORY S

Provider ID: 125981
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax:
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: A90018
NPI: 1841467099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARYAFAR, HAMED

Provider ID: 63784
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A99187
NPI: 1093963605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ARYAFAR, HAMED

Provider ID: 64269
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A99187
NPI: 1093963605
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Sharp Memorial Hospital,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:

BAHADOR, FARSHAD M

Provider ID: 104318
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # 1505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A129414
NPI: 1730316928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Green
Hospital, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BAHADOR, FARSHAD M

Provider ID: 104323
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Male

License number: A129414

NPI: 1730316928

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Green

Hospital, Scripps Memorial

Hospital, Scripps Mercy Hospital,

Scripps Mercy Hospital Chula

Vista, Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BAKER, LORI L

Provider ID: 115588

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Female

License number: G62517

NPI: 1063465219

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Medical Ctr At Ucsf,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BAKER, LORI L

Provider ID: 125991

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

6386 ALVARADO CT STE 121

SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (619) 229-2288

After Hours Phone: (619)

229-2299

Provider Gender: Female

License number: G62517

NPI: 1063465219

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital, Medical Ctr At Ucsf,

Scripps Mercy Hospital Chula

Vista

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BERGMAN, ERIK W

Provider ID: 125001

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: C153284

NPI: 1043291073

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BERGMAN, ERIK W

Provider ID: 125005

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9420

Fax:

After Hours Phone: (619)

471-9420

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: C153284
NPI: 1043291073
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 115876
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BORSO, MAYA G

Provider ID: 126000
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Female
License number: A97134
NPI: 1548473507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BRADLEY, WILLIAM R

Provider ID: 271433
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A167142
NPI: 1780066803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BRADLEY, WILLIAM R

Provider ID: 271435
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A167142
NPI: 1780066803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BROUHA, SHARON S

Provider ID: 63823
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A91973
NPI: 1356554323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
BROUHA, SHARON S
Provider ID: 64278
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A91973
NPI: 1356554323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BUCKLEY, DAVID W

Provider ID: 243260
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male

License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W

Provider ID: 243261
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W

Provider ID: 243266
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, DAVID W

Provider ID: 243268
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225
Fax:
After Hours Phone: (619)
260-7225
Provider Gender: Male
License number: G57383
NPI: 1982657060
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUI, KEVIN T

Provider ID: 280518
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A134576
NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BUI, KEVIN T

Provider ID: 280520
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A134576
NPI: 1578906186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CASOLA, GIOVANNA

Provider ID: 63835
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian
Cultural Competency: No
Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CASOLA, GIOVANNA

Provider ID: 64281
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G51575
NPI: 1790721256
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Italian
Cultural Competency: No
Hospital Affiliation: Saddleback

Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHANG, ERIC Y

Provider ID: 63840
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A97139
NPI: 1376756353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, JAMES Y

Provider ID: 63844
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A108635
NPI: 1427250588
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, JAMES Y

Provider ID: 64284
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A108635
NPI: 1427250588
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: IPA:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHEN, KAREN C

Provider ID: 63846
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A110719
NPI: 1437377710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

CHEN, KAREN C

Provider ID: 64285
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A110719
NPI: 1437377710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHOU, ERIC T

Provider ID: 116991
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male

License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 126004
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHUNG, CHRISTINE B

Provider ID: 63854
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A65414
NPI: 1528033560
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHUNG, CHRISTINE B

Provider ID: 64288
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax: (619) 471-9245
After Hours Phone: (619) 471-9240
Provider Gender: Female
License number: A65414
NPI: 1528033560
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COOPER, JAMES A

Provider ID: 115589
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center, Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta, Coast Plaza Hospital, Community Hospital Of Huntington Park, Foothill Regional Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 126039
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A62473
NPI: 1497708622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula

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D. Directorio de proveedores de atención especializada

Vista, East Los Angeles Doctors
Hsp, Memorial Hosp Of Gardena
Inc, Riverside Community Hosp,
Palmdale Regional Medical
Center, Barstow Community
Hospital, Kindred Hospital South
Bay, Loma Linda University Med
Ctr Murrieta
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DE GUZMAN, JADE Q

Provider ID: 63873
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Ronald Reagan Ucla
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

DE GUZMAN, JADE Q

Provider ID: 64289
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Female
License number: A102678
NPI: 1801089065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Ronald Reagan Ucla
Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DOEMENY, JOHN M

Provider ID: 115877
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
295-9729
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 126046
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DORROS, STEPHEN M

Provider ID: 63880
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: G29061
 NPI: 1942319959
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DORROS, STEPHEN M

Provider ID: 64292
 Board Certified Specialty: No

UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: G29061
 NPI: 1942319959
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DWEK, JERRY R

Provider ID: 63886
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G86073
 NPI: 1558335695
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish

Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Ucsd La Jolla John Sally Thornton, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego, Palomar Medical Center, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

DWEK, JERRY R

Provider ID: 64295
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: G86073
 NPI: 1558335695
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Spanish
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr, Ucsd Medical Ctr, Pomerado Hospital, Ucsd La Jolla John Sally Thornton, Sharp Coronado Hosp And Healthcare Ctr, Rady Childrens Hospital San Diego, Palomar Medical Center,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Sharp Memorial Hospital, Sharp
Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EGHTEDARI, MOHAMMAD

Provider ID: 92412
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A114372
NPI: 1740548734
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 63896

Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: G76577
NPI: 1790751188
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Sharp Chula Vista Med Ctr,
Sharp Coronado Hosp And
Healthcare Ctr, Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

EVORA, DARRYL K

Provider ID: 64298
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: G76577
NPI: 1790751188

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Ucsd Medical
Ctr, Sharp Chula Vista Med Ctr,
Sharp Coronado Hosp And
Healthcare Ctr, Ucsd La Jolla
John Sally Thornton, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FARID, NIKDOKHT

Provider ID: 63901
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Female
License number: A94195
NPI: 1205151172
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FARID, NIKDOKHT

Provider ID: 64301

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: A94195

NPI: 1205151172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FARID, NIKDOKHT

Provider ID: 91912

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

8929 UNIVERSITY CENTER LN

STE 101

SAN DIEGO, CA 92122-1007

Phone: (858) 457-4227

Fax: (858) 457-4227

After Hours Phone: (858)

457-4227

Provider Gender: Female

License number: A94195

NPI: 1205151172

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FIROOZNIA, NILOFAR

Provider ID: 115590

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Female

License number: A109806

NPI: 1962521419

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Redlands

Community Hosp, Barstow

Community Hospital, Kindred

Hospital Riverside, Victor Valley

Global Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

FIROOZNIA, NILOFAR

Provider ID: 126168

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

6386 ALVARADO CT STE 121

SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax:

After Hours Phone: (619)

229-2299

Provider Gender: Female

License number: A109806

NPI: 1962521419

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Redlands

Community Hosp, Barstow

Community Hospital, Kindred

Hospital Riverside, Victor Valley

Global Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA:	Phone: (800) 926-8273	Provider English Spoken: Yes
FLISZAR, EVELYNE	Fax:	Provider Language(s) Spoken:
Provider ID: 63907	After Hours Phone: (800)	French
Board Certified Specialty: No	926-8273	Cultural Competency: No
UCSD MEDICAL GROUP	Provider Gender: Female	Hospital Affiliation: Scripps
200 W ARBOR DR	License number: A60712	Green Hospital, Scripps
SAN DIEGO, CA 92103-1911	NPI: 1164449955	Memorial Hospital, Scripps
Phone: (619) 543-6222	Provider English Spoken: Yes	Mercy Hospital, Ucsd Medical
Fax:	Provider Language(s) Spoken:	Ctr, Ucsd La Jolla John Sally
After Hours Phone: (619)	French	Thornton, Scripps Mercy Hospital
543-6222	Cultural Competency: No	Chula Vista, Scripps Memorial
Provider Gender: Female	Hospital Affiliation: Scripps	Hospital Encinitas
License number: A60712	Green Hospital, Scripps	Medi-Cal Open Panel: No
NPI: 1164449955	Memorial Hospital, Scripps	Min/Max Age: None
Provider English Spoken: Yes	Mercy Hospital, Ucsd Medical	American Sign Language (ASL):
Provider Language(s) Spoken:	Ctr, Ucsd La Jolla John Sally	No
French	Thornton, Scripps Mercy Hospital	Accessibility: W
Cultural Competency: No	Chula Vista, Scripps Memorial	Hours: M-SA 9AM-5PM
Hospital Affiliation: Scripps	Hospital Encinitas	Website:
Memorial Hospital, Scripps	Medi-Cal Open Panel: No	Email:
Mercy Hospital, Ucsd Medical	Min/Max Age: None	Medical Group(s):
Ctr, Ucsd La Jolla John Sally	American Sign Language (ASL):	IPA:
Thornton, Scripps Mercy Hospital	No	
Chula Vista, Scripps Memorial	Accessibility:	FORCIER, NANCY J
Hospital Encinitas, Scripps	Hours: M-SA 9AM-5PM	Provider ID: 286954
Green Hospital	Website:	Board Certified Specialty: No
Medi-Cal Open Panel: No	Email:	UCSD MEDICAL GROUP
Min/Max Age: None	Medical Group(s):	200 W ARBOR DR
American Sign Language (ASL):	IPA:	SAN DIEGO, CA 92103-1911
No		Phone: (800) 926-8273
Accessibility: W	FLISZAR, EVELYNE	Fax: (888) 539-8781
Hours: M-SA 9AM-5PM	Provider ID: 97463	After Hours Phone: (800)
Website:	Board Certified Specialty: No	926-8273
Email:	UCSD RADIOLOGY AT LA	Provider Gender: Female
Medical Group(s):	JOLLA	License number: G72420
IPA:	8929 UNIVERSITY CENTER LN	NPI: 1497721724
	STE 101	Provider English Spoken: Yes
FLISZAR, EVELYNE	SAN DIEGO, CA 92122-1007	Provider Language(s) Spoken:
Provider ID: 64303	Phone: (858) 457-4227	Cultural Competency: No
Board Certified Specialty: No	Fax:	Hospital Affiliation: Scripps
UCSD MEDICAL GROUP	After Hours Phone: (858)	Green Hospital, Scripps
330 LEWIS ST # 202	457-4227	Memorial Hospital, Providence
SAN DIEGO, CA 92103-2108	Provider Gender: Female	Mission Hospital
	License number: A60712	Medi-Cal Open Panel: Yes
	NPI: 1164449955	Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website: No
Email: No
Medical Group(s): No
IPA: Ucsd Medical Group

FORCIER, NANCY J

Provider ID: 286956
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: G72420
NPI: 1497721724
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website: No
Email: No
Medical Group(s): No
IPA: Ucsd Medical Group

FOWLER, KATHRYN J

Provider ID: 201289
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: No
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C154877
NPI: 1255457941
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website: No
Email: No
Medical Group(s): No
IPA: Ucsd Medical Group

FOWLER, KATHRYN J

Provider ID: 201291
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: No
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: C154877
NPI: 1255457941
Provider English Spoken: Yes
Provider Language(s) Spoken: No

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: No
Hours: M-SA 9AM-5PM
Website: No
Email: No
Medical Group(s): No
IPA: Ucsd Medical Group

FRANKE, MARK A

Provider ID: 115878
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: No
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken: No
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

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D. Directorio de proveedores de atención especializada

♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 126051
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax:
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRIEND, CHRISTOPHER J

Provider ID: 120846
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, CHRISTOPHER J

Provider ID: 120850
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, CHRISTOPHER J

Provider ID: 120851
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FRIEND, CHRISTOPHER J

Provider ID: 120857
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: C141231
NPI: 1861491516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GENTILI, AMILCARE

Provider ID: 63914
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A44208
NPI: 1922086594
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Ucsd Medical

Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GENTILI, AMILCARE

Provider ID: 64307
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A44208
NPI: 1922086594
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Ucsd La
Jolla John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GRISSOM, MURRAY J

Provider ID: 271567
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A147782
NPI: 1720465396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GRISSOM, MURRAY J

Provider ID: 271569
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A147782
 NPI: 1720465396
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HAHN, MICHAEL E
 Provider ID: 98501
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A119409
 NPI: 1356573992
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HAHN, MICHAEL E
 Provider ID: 98502
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A119409
 NPI: 1356573992
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HANDWERKER, JASON
 Provider ID: 98754
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: A114704
 NPI: 1316166630
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: University Of California Irvine Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HANDWERKER, JASON
 Provider ID: 98757
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: A114704
 NPI: 1316166630
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, University Of California Irvine Med Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HANSEN, ROBERT B

Provider ID: 110176
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A97152
NPI: 1972643906
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: George L Mee Memorial Hosp, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Dameron Hospital Assoc, St Josephs Med Center Of Stockton, Memorial Hospital Med Ctr, John C Fremont Hospital, Mountains Community Hosp, Lodi Memorial Hospital, Oak Valley Dist Hosp
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA:
HARMAN, SCOTT A
Provider ID: 115591
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HARMAN, SCOTT A

Provider ID: 126064
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male

License number: G57284
NPI: 1124071311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAUSCHILDT, JOHN P

Provider ID: 63947
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G76429
NPI: 1922072099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HAUSCHILDT, JOHN P

Provider ID: 64318
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G76429
NPI: 1922072099
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HERNANDEZ, NATHANIEL D

Provider ID: 110164
Board Certified Specialty: No
 UCSD MEDICAL GROUP

200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A141384
NPI: 1427377019
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HILLER, LUCAS P

Provider ID: 63957
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91321
NPI: 1417160474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital,

Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HILLER, LUCAS P

Provider ID: 64321
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91321
NPI: 1417160474
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No ☎ Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: HOROWITZ, MICHAEL J Provider ID: 126572 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A135132 NPI: 1518306851 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☎ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: HSIAO, ALBERT Provider ID: 110157 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911	Phone: (619) 543-2218 Fax: (619) 471-9473 After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A105882 NPI: 1457546244 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☎ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: HUANG, BRADY K Provider ID: 110528 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 8929 UNIVERSITY CENTER LN STE 101 SAN DIEGO, CA 92122-1007 Phone: (858) 457-4227 Fax: (858) 554-2699 After Hours Phone: (858) 457-4227 Provider Gender: Male License number: A108832 NPI: 1407860299 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton	Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☎ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: HUANG, BRADY K Provider ID: 63969 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR # 1505 SAN DIEGO, CA 92103-1911 Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: A108832 NPI: 1407860299 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No ☎ Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: HUANG, BRADY K Provider ID: 64325
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A108832
NPI: 1407860299
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHES, TUDOR H

Provider ID: 63971
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A83748
NPI: 1932187127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HUGHES, TUDOR H

Provider ID: 64326
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A83748
NPI: 1932187127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IMBESI, STEVEN G

Provider ID: 63978
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: G79078
NPI: 1891710554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IMBESI, STEVEN G

Provider ID: 64330
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G79078
NPI: 1891710554
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Saddleback Memorial Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ISHIOKA, KEVIN M

Provider ID: 83629
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A93286
NPI: 1437362498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital, Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ISHIOKA, KEVIN M

Provider ID: 83630
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A93286
NPI: 1437362498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 115880
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL

GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

JOHNSON, JOHN O

Provider ID: 126076
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: G59632
NPI: 1073565792
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KARIMI, AFSHIN

Provider ID: 63993

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR # I505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A96518

NPI: 1952511214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Persian

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Pioneers

Memorial Hospital, Southwest

Healthcare System Wildomar,

Southwest Healthcare System

Murrieta, University Of California

Irvine Med Ctr, Ucsd Medical Ctr,

Ucsd La Jolla John Sally

Thornton, Temecula Valley

Hospital Inc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KARIMI, AFSHIN

Provider ID: 64334

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Male

License number: A96518

NPI: 1952511214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Persian

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Temecula Valley

Hospital Inc, Scripps Green

Hospital, Pioneers Memorial

Hospital, Southwest Healthcare

System Wildomar, Southwest

Healthcare System Murrieta,

University Of California Irvine

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAROW, DAVID S

Provider ID: 63994

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR # I505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A96935

NPI: 1932490703

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Santa Monica

Ucla Med Ctr, Ucsd Medical Ctr,

Ronald Reagan Ucla Med Ctr,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KAROW, DAVID S

Provider ID: 64335

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Male

License number: A96935

NPI: 1932490703

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
 Ucla Med Ctr, Ucsd Medical Ctr,
 Ronald Reagan Ucla Med Ctr,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KHANNA, PARITOSH

Provider ID: 64000
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218
Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA:
KHANNA, PARITOSH
Provider ID: 64338
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Male
License number: C54827
NPI: 1568572832
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIKOLSKI, STEVEN G

Provider ID: 64005
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218

Provider Gender: Male
License number: A106307
NPI: 1063647485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton, Scripps Mercy Hospital
 Chula Vista, Scripps Memorial
 Hospital Encinitas, Scripps
 Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIKOLSKI, STEVEN G

Provider ID: 64339
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Male
License number: A106307
NPI: 1063647485
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Memorial Hospital, Scripps
 Mercy Hospital, Ucsd Medical
 Ctr, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton, Scripps Mercy Hospital
Chula Vista, Scripps Memorial
Hospital Encinitas, Scripps
Green Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KINNEY, THOMAS B

Provider ID: 64008

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # I505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: G64176

NPI: 1992732671

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KINNEY, THOMAS B

Provider ID: 64340

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Male

License number: G64176

NPI: 1992732671

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KINNE, ERICA L

Provider ID: 83292

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Female

License number: A110179

NPI: 1487803946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Loma Linda University Med
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Ucsd La
Jolla John Sally Thornton,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital, Loma Linda University
Childrens Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KINNE, ERICA L

Provider ID: 83293

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: A110179

NPI: 1487803946

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Loma Linda University Med
Ctr, Scripps Memorial Hospital,
Scripps Mercy Hospital, Ucsd La
Jolla John Sally Thornton,
Scripps Mercy Hospital Chula

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D. Directorio de proveedores de atención especializada

Vista, Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital, Loma Linda University
Childrens Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KRUK, PETER G

Provider ID: 64021

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # I505

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)
926-8273

Provider Gender: Male

License number: A96070

NPI: 1366480634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Sharp

Coronado Hosp And Healthcare

Ctr, Rady Childrens Hospital San

Diego, Grossmont Hospital,

Sharp Memorial Hospital, Ucsd

Medical Ctr, Sharp Chula Vista

Med Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KRUK, PETER G

Provider ID: 64342

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Male

License number: A96070

NPI: 1366480634

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial

Hospital, Ucsd Medical Ctr,

Sharp Chula Vista Med Ctr, Ucsd

La Jolla John Sally Thornton,

Sharp Coronado Hosp And

Healthcare Ctr, Rady Childrens

Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KUNIYOSHI, JEREMY K

Provider ID: 121392

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A76172

NPI: 1124212667

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

KUNIYOSHI, JEREMY K

Provider ID: 121392

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A76172

NPI: 1124212667

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KUNIYOSHI, JEREMY K

Provider ID: 121392
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A76172
NPI: 1124212667
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KUNIYOSHI, JEREMY K

Provider ID: 121392
Board Certified Specialty: No

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A76172
NPI: 1124212667
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LADD, WILLIAM A

Provider ID: 64024
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: G63024
NPI: 1063463230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps

Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LADD, WILLIAM A

Provider ID: 64343
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G63024
NPI: 1063463230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

LECOMTE, MATTHEW D

Provider ID: 283487
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A171824
NPI: 1508210683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LECOMTE, MATTHEW D

Provider ID: 283489
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A171824
NPI: 1508210683
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

LEE, ROLAND R

Provider ID: 64033
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: G57800
NPI: 1639190028
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA:

LEE, ROLAND R

Provider ID: 64346
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-2218
Fax: (619) 471-9473
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: G57800
NPI: 1639190028
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LIM, VIVIAN

Provider ID: 125928
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: G58509
 NPI: 1295796753
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Memorial Hospital, Rady Childrens Hospital San Diego, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LIZERBRAM, ERIC K
 Provider ID: 118297
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (619) 295-9729
 Fax: (619) 295-2549
 After Hours Phone: (619) 295-9729
 Provider Gender: Male
 License number: G74959
 NPI: 1598718926
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):

No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:
LIZERBRAM, ERIC K
 Provider ID: 126090
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
 Phone: (619) 229-2299
 Fax: (619) 229-2288
 After Hours Phone: (619) 229-2299
 Provider Gender: Male
 License number: G74959
 NPI: 1598718926
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

LUBISICH, JOHN P
 Provider ID: 115592
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST

LUBISICH, JOHN P
 Provider ID: 115592
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005
 Phone: (858) 658-6500
 Fax: (619) 295-2549
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: G77575
 NPI: 1194863902
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LUBISICH, JOHN P
 Provider ID: 126096
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
 Phone: (619) 229-2299
 Fax: (619) 229-2288
 After Hours Phone: (619) 229-2299
 Provider Gender: Male
 License number: G77575
 NPI: 1194863902
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Scripps Mercy

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D. Directorio de proveedores de atención especializada

Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MAFEE, MAHMOOD F

Provider ID: 64055
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: A31751
NPI: 1356431373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAFEE, MAHMOOD F

Provider ID: 64351
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A31751
NPI: 1356431373
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 64063
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Female
License number: A96803
NPI: 1699988667
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MAREK BYKOWSKI, JULIE L

Provider ID: 64354
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Female
License number: A96803
NPI: 1699988667
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

MAREK BYKOWSKI, JULIE L <i>Provider ID:</i> 89937 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 8929 UNIVERSITY CENTER LN STE 101 SAN DIEGO, CA 92122-1007 <i>Phone:</i> (858) 457-4227 <i>Fax:</i> (858) 457-4231 <i>After Hours Phone:</i> (858) 457-4227 <i>Provider Gender:</i> Female <i>License number:</i> A96803 <i>NPI:</i> 1699988667 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	<i>License number:</i> 20A15523 <i>NPI:</i> 1790047371 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Mountains Community Hosp <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
MEIGS, JASON G <i>Provider ID:</i> 118450 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male	MEISINGER, QUINN C <i>Provider ID:</i> 118221 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A123683 <i>NPI:</i> 1215222757 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	MEISINGER, QUINN C <i>Provider ID:</i> 118222 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A123683 <i>NPI:</i> 1215222757 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: No <i>Hospital Affiliation:</i> Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
	MEISINGER, QUINN C <i>Provider ID:</i> 118373 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911	MEISINGER, QUINN C <i>Provider ID:</i> 118373 <i>Board Certified Specialty:</i> No UCSD RADIOLOGY AT LA JOLLA 200 W ARBOR DR SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A123683 NPI: 1215222757 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	JOLLA 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 Phone: (619) 543-2218 Fax: After Hours Phone: (619) 543-2218 Provider Gender: Male License number: A146108 NPI: 1821356825 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:
MEISINGER, QUINN C Provider ID: 118376 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Male License number: A123683 NPI: 1215222757 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No	MINOCHA, JEET Provider ID: 90536 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A132823 NPI: 1548416266 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA:	MISRA, CHANDAN Provider ID: 118481 Board Certified Specialty: No UCSD RADIOLOGY AT LA JOLLA 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 Phone: (619) 471-9240 Fax: After Hours Phone: (619) 471-9240 Provider Gender: Male License number: A146108 NPI: 1821356825 Provider English Spoken: Yes Provider Language(s) Spoken:
MISRA, CHANDAN Provider ID: 118479 Board Certified Specialty: No UCSD RADIOLOGY AT LA		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sutter Santa Rosa Regional Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MOFFIT, BRIAN J

Provider ID: 115883
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc
MOFFIT, BRIAN J
Provider ID: 126117
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MURPHY, PAUL M

Provider ID: 116425
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A123586
NPI: 1295050946
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ronald Reagan UCLA Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Santa Monica UCLA Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAHEEDY, JOHN H

Provider ID: 64102
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # 1505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A99832
NPI: 1760695761
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Sharp Memorial

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital, Sharp Coronado Hosp
And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NAHEEDY, JOHN H

Provider ID: 64360
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Male
License number: A99832
NPI: 1760695761
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
Memorial Hospital, Sharp
Coronado Hosp And Healthcare
Ctr, Ucsd Medical Ctr, Ucsd La
Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NEWTON, ISABEL G

Provider ID: 84298
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A108128
NPI: 1306068697
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NEWTON, ISABEL G

Provider ID: 84300
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
471-9240
Provider Gender: Female
License number: A108128
NPI: 1306068697

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

NORBASH, ALEXANDER M

Provider ID: 125625
Board Certified Specialty: No
UCSD RADIOLOGY AT LA
JOLLA
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
543-2218
Provider Gender: Male
License number: G62865
NPI: 1790752269
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA:

NORBASH, ALEXANDER M
Provider ID: 125630
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: G62865
NPI: 1790752269
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBOYLE, MARY K
Provider ID: 64114
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Female
License number: G73501
NPI: 1568487999
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBOYLE, MARY K
Provider ID: 64362
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-3405
Fax:
After Hours Phone: (619) 543-3405
Provider Gender: Female
License number: G73501
NPI: 1568487999
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

OBRZUT, SEBASTIAN
Provider ID: 64116
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # 1505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Male
License number: A85028
NPI: 1083714398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OBRZUT, SEBASTIAN
Provider ID: 64363
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A85028
NPI: 1083714398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OJEDA-FOURNIER, HAYDEE

Provider ID: 64118
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Female
License number: A99462
NPI: 1871537191
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OJEDA-FOURNIER, HAYDEE

Provider ID: 64364
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Female
License number: A99462
NPI: 1871537191
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OLOUGHLIN, BRIAN J

Provider ID: 115593
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005

Phone: (858) 658-6500
Fax:
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A120064
NPI: 1972709087
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica Ucla Med Ctr, Alvarado Hospital Llc, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OLOUGHLIN, BRIAN J

Provider ID: 126123
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax:
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A120064
NPI: 1972709087
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital, Santa Monica Ucla Med Ctr, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 115594
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858) 658-6500
Provider Gender: Female
License number: G48800
NPI: 1285685925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA:

OSHAUGHNESSY, LOUISE S

Provider ID: 126129
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Female
License number: G48800
NPI: 1285685925
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAKBAZ, RAMIN S

Provider ID: 64125
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218

Provider Gender: Male
License number: A73947
NPI: 1811072457
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Sutter Roseville Medical Center, Mercy General Hospital, Mercy San Juan Hospital, Scripps Green Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAKBAZ, RAMIN S

Provider ID: 64367
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Male
License number: A73947
NPI: 1811072457
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> Sutter Roseville Medical Center, Mercy General Hospital, Mercy San Juan Hospital, Scripps Green Hospital, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ucsd Medical Ctr, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-2218 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-2218 <i>Provider Gender:</i> Male <i>License number:</i> A133973 <i>NPI:</i> 1225355720 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sierra Vista Regional Med Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Goleta Valley Cottage Hosp <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>
PATHRIA, MINI N <i>Provider ID:</i> 64133 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # I505 SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A43771 <i>NPI:</i> 1699739318 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>	PATHRIA, MINI N <i>Provider ID:</i> 64368 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A43771 <i>NPI:</i> 1699739318 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	PATIL, AMOL A <i>Provider ID:</i> 98853 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 330 LEWIS ST # 202 SAN DIEGO, CA 92103-2108 <i>Phone:</i> (619) 471-9240 <i>Fax:</i> <i>After Hours Phone:</i> (619) 471-9240 <i>Provider Gender:</i> Male <i>License number:</i> A133973 <i>NPI:</i> 1225355720 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, Hindi <i>Cultural Competency:</i> No
PATIL, AMOL A <i>Provider ID:</i> 98852 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # I505	PATIL, AMOL A <i>Provider ID:</i> 98852 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR # I505	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sierra Vista
Regional Med Ctr, Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Goleta Valley Cottage
Hosp

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PRETORIUS, DOLORES H

Provider ID: 64147

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: C39102

NPI: 1902839418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PRETORIUS, DOLORES H

Provider ID: 64370

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9420

Fax:

After Hours Phone: (619)
471-9420

Provider Gender: Female

License number: C39102

NPI: 1902839418

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RAKOW-PENNER, REBECCA A

Provider ID: 118624

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # I505

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)
543-2218

Provider Gender: Female

License number: A128755

NPI: 1558651497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

RATTNER, ZACHARY G

Provider ID: 35244

Board Certified Specialty: No
SOUTHERN CALIFORNIA
INTERVENTIONAL ASSOC

995 GATEWAY CENTER WAY
STE 207

SAN DIEGO, CA 92102-4544

Phone: (619) 263-9729

Fax: (858) 454-4644

After Hours Phone: (619)
263-9729

Provider Gender: Male

License number: G86843

NPI: 1003867276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Paradise
Valley Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:* W
Hours: M,W-F 7:30AM-4PM,
 TU,SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RESNICK, DONALD L

Provider ID: 64157
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218
Provider Gender: Male
License number: G18577
NPI: 1164450938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Scripps Green Hospital,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No

♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RESNICK, DONALD L

Provider ID: 64372
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Male
License number: G18577
NPI: 1164450938
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Scripps Green Hospital,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIAD, SHAREEF M

Provider ID: 64158
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Male
License number: A106536
NPI: 1417111477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Doctors
 Medical Center, West Hills
 Hospital Medical Center, Salinas
 Valley Memorial Hosp, Riverside

Community Hosp, Parkview
 Community Hospital Medical
 Center, St Bernardine Med Ctr,
 Community Hosp Of San
 Bernardino, Kindred Hospital
 Ontario, Ucsd La Jolla John Sally
 Thornton, Dameron Hospital
 Assoc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RIAD, SHAREEF M

Provider ID: 64373
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 543-3000
Fax:
After Hours Phone: (619)
 543-3000
Provider Gender: Male
License number: A106536
NPI: 1417111477
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Doctors
 Medical Center, West Hills
 Hospital Medical Center, Salinas
 Valley Memorial Hosp, Riverside
 Community Hosp, Parkview
 Community Hospital Medical
 Center, St Bernardine Med Ctr,
 Community Hosp Of San
 Bernardino, Kindred Hospital
 Ontario, Ucsd La Jolla John Sally

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Thornton, Dameron Hospital
 Assoc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RICHMAN, KATHERINE M

Provider ID: 64159
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619)
 543-2218
Provider Gender: Female
License number: G80333
NPI: 1992898993
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RICHMAN, KATHERINE M

Provider ID: 64374
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Female
License number: G80333
NPI: 1992898993
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTS, ANNE C

Provider ID: 64162
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Female
License number: G58654
NPI: 1669497996
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTS, ANNE C

Provider ID: 64376
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619)
 471-9240
Provider Gender: Female
License number: G58654
NPI: 1669497996
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

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D. Directorio de proveedores de atención especializada

ROMINE, LORENE E

Provider ID: 64165
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-2218
Fax:
After Hours Phone: (619) 543-2218
Provider Gender: Female
License number: A87658
NPI: 1720209786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Cedars Sinai Medical Center, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROMINE, LORENE E

Provider ID: 64378
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (619) 471-9240
Fax:
After Hours Phone: (619) 471-9240
Provider Gender: Female
License number: A87658
NPI: 1720209786

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Cedars Sinai Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROSSI, CARL J

Provider ID: 81385
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 9730 SUMMERS RIDGE RD
 SAN DIEGO, CA 92121-3101
Phone: (858) 549-7458
Fax: (858) 578-1144
After Hours Phone: (858) 549-7458
Provider Gender: Male
License number: G66352
NPI: 1518983055
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Rady Childrens Hospital San Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SANTILLAN, CYNTHIA S

Provider ID: 103164
Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 8929 UNIVERSITY CENTER LN STE 101
 SAN DIEGO, CA 92122-1007
Phone: (858) 457-4227
Fax:
After Hours Phone: (858) 457-4227
Provider Gender: Female
License number: A90879
NPI: 1932132404

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SANTILLAN, CYNTHIA S

Provider ID: 64179
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A90879
 NPI: 1932132404
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SANTILLAN, CYNTHIA S

Provider ID: 64382
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A90879
 NPI: 1932132404
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SCHECHTER, MARK S

Provider ID: 115894
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (619) 295-9729
 Fax: (619) 295-2549
 After Hours Phone: (619) 295-9729
 Provider Gender: Male
 License number: G42390
 NPI: 1942253018
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SCHECHTER, MARK S

Provider ID: 126135
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
 Phone: (619) 229-2299
 Fax: (619) 229-2288
 After Hours Phone: (619) 229-2299
 Provider Gender: Male
 License number: G42390
 NPI: 1942253018
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, El Centro Regional Medical Center, Selma Community Hospital, Adventist Medical Center, Adventist Med Ctr Reedley, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SCHWARTZBERG, ROSS E

Provider ID: 115895
 Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (619) 295-9729
 Fax: (619) 295-2549
 After Hours Phone: (619) 295-9729

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 126142
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SIRLIN, CLAUDE B

Provider ID: 64203
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Saddleback Memorial Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIRLIN, CLAUDE B

Provider ID: 64387
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

Provider Gender: Male
License number: G80184
NPI: 1730261793
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Saddleback Memorial Med Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SLATER, JERRY

Provider ID: 283310
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172254
NPI: 1851746382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SLATER, JERRY

Provider ID: 283312
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172254
NPI: 1851746382
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SMITAMAN, EDWARD

Provider ID: 110530
Board Certified Specialty: No
UCSD RADIOLOGY AT LA JOLLA
8929 UNIVERSITY CENTER LN
STE 101
SAN DIEGO, CA 92122-1007

Phone: (858) 457-4227
Fax: (858) 457-4231
After Hours Phone: (858) 457-4227
Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken: Thai
Cultural Competency: No
Hospital Affiliation: Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITAMAN, EDWARD

Provider ID: 64207
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR # I505
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken: Thai
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SMITAMAN, EDWARD

Provider ID: 64389
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A119696
NPI: 1477720092
Provider English Spoken: Yes
Provider Language(s) Spoken: Thai
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SNYDER, WILLIAM C

Provider ID: 115896

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SNYDER, WILLIAM C

Provider ID: 126149
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A65059
NPI: 1477505162
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SPOTO, GARY P

Provider ID: 115595
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

IPA:

SPOTO, GARY P

Provider ID: 126155
Board Certified Specialty: No
IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: G58131
NPI: 1659332062
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

STANFILL, JOHN G

Provider ID: 84901
Board Certified Specialty: No
UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Male

License number: A124808

NPI: 1831364330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Scripps

Memorial Hospital Encinitas,

Scripps Green Hospital, Ucsd La

Jolla John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

SUN, ALEX W

Provider ID: 268632

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Male

License number: A133334

NPI: 1538502331

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr, Scripps Green

Hospital, Scripps Memorial

Hospital, Scripps Mercy Hospital,

Scripps Memorial Hospital

Encinitas, Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SU, TEDDY J

Provider ID: 100417

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: A105730

NPI: 1003881830

Provider English Spoken: Yes

Provider Language(s) Spoken:

Italian, Mandarin, Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Sutter Roseville Medical

Center, Sutter Medical Center

Sacramento, Sutter Auburn Faith

Hosp, Sutter Davis Hospital,

Sutter Surgical Hospital North

Valley

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TADROS, ANTHONY S

Provider ID: 268546

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A128627

NPI: 1306112057

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

TAMAYO-MURILLO, DORATHY E

Provider ID: 126827

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAMAYO-MURILLO, DORATHY E

Provider ID: 126829

Board Certified Specialty: No

UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAMAYO-MURILLO, DORATHY E

Provider ID: 126831

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)

543-2218

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TAMAYO-MURILLO, DORATHY E

Provider ID: 126833

Board Certified Specialty: No

UCSD RADIOLOGY AT LA

JOLLA

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)

471-9240

Provider Gender: Female

License number: A152645

NPI: 1700225711

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TENA, ROWENA G

Provider ID: 115897

Board Certified Specialty: No

IHS RADIOLOGY MEDICAL

GROUP INC

150 W WASHINGTON ST

SAN DIEGO, CA 92103-2005

Phone: (619) 295-9729

Fax: (619) 295-2549

After Hours Phone: (619)

295-9729

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G

Provider ID: 126161
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Vibra Hospital Of San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TOBIN, MICHAEL L

Provider ID: 115898
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (619) 295-2549
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TOBIN, MICHAEL L

Provider ID: 126212
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: A45908
NPI: 1730132150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TSUKADA, GLENN H

Provider ID: 115596
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: A60235
NPI: 1710938394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Grossmont Hospital, Scripps Mercy Hospital, Ucsd Medical Ctr, Scripps Mercy

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Alvarado
Hospital Llc, Pomerado Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TSUKADA, GLENN H

Provider ID: 126199

Board Certified Specialty: No
IHS RADIOLOGY MEDICAL
GROUP INC

6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (619) 229-2288

After Hours Phone: (619)
229-2299

Provider Gender: Male

License number: A60235

NPI: 1710938394

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Pomerado
Hospital, Alvarado Hospital Llc,

Scripps Memorial Hospital,

Grossmont Hospital, Scripps

Mercy Hospital, Ucsd Medical

Ctr, Scripps Mercy Hospital

Chula Vista, Scripps Memorial

Hospital Encinitas, Scripps

Green Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TYAGI, AVISHKAR

Provider ID: 84932

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Male

License number: A123065

NPI: 1740440148

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, San Dimas Community

Hospital, Lakewood Regional

Med Ctr, Pacific Alliance Medical

Center, San Antonio Comm

Hosp, Tri City Medical Ctr,

Palomar Health Downtown

Campus, Pomerado Hospital,

Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

TYAGI, AVISHKAR

Provider ID: 84934

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Male

License number: A123065

NPI: 1740440148

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally

Thornton, San Dimas Community

Hospital, Lakewood Regional

Med Ctr, Pacific Alliance Medical

Center, San Antonio Comm

Hosp, Tri City Medical Ctr,

Palomar Health Downtown

Campus, Pomerado Hospital,

Alvarado Hospital Llc

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VINOCUR, DANIEL N

Provider ID: 64243

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # 1505

SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-2218

Fax:

After Hours Phone: (619)
543-2218

Provider Gender: Male

License number: A115727

NPI: 1770711830

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

VINOCUR, DANIEL N

Provider ID: 64394

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Male

License number: A115727

NPI: 1770711830

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WAGNER, THAO N

Provider ID: 84943

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: A123521

NPI: 1821067935

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: No

Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital, Scripps Mercy
Hospital Chula Vista, Scripps
Memorial Hospital Encinitas,
Scripps Green Hospital, Ucsd
Medical Ctr, Ucsd La Jolla John
Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WAGNER, THAO N

Provider ID: 84945

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (619) 471-9240

Fax:

After Hours Phone: (619)
471-9240

Provider Gender: Female

License number: A123521

NPI: 1821067935

Provider English Spoken: Yes

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton, Scripps Memorial
Hospital, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula
Vista, Scripps Memorial Hospital
Encinitas, Scripps Green
Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

WALLACE, DAVID R

Provider ID: 98888

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR # 1505

SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: A136122
 NPI: 1265743595
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WALLACE, DAVID R

Provider ID: 98890
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: A136122
 NPI: 1265743595
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical

Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WANG, LEE L

Provider ID: 118160
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Male
 License number: A146921
 NPI: 1003119975
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA:
WANG, LEE L
 Provider ID: 118162
 Board Certified Specialty: No
 UCSD RADIOLOGY AT LA JOLLA
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (691) 471-9240
 Fax:
 After Hours Phone: (691) 471-9240
 Provider Gender: Male
 License number: A146921
 NPI: 1003119975
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Green Hospital, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WEIHE, ELIZABETH

Provider ID: 102368
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Female
 License number: A135679
 NPI: 1386884302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

WEIHE, ELIZABETH

Provider ID: 121941
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-2218
 Fax:
 After Hours Phone: (619) 543-2218
 Provider Gender: Female
 License number: A135679
 NPI: 1386884302
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

YEN, ANDREW C

Provider ID: 64263
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR # I505
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A89413
 NPI: 1942499116
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

YEN, ANDREW C

Provider ID: 64398
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A89413
 NPI: 1942499116
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ZAKHARY, MINA M

Provider ID: 84250
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (619) 471-9240
 Fax:
 After Hours Phone: (619) 471-9240
 Provider Gender: Male
 License number: A124821
 NPI: 1114185626
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic, Hebrew
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

Green Hospital, Ucsd Medical Ctr, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 115904
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619) 295-9729
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ZINK BRODY, GORDON C

Provider ID: 126192
Board Certified Specialty: No
 IHS RADIOLOGY MEDICAL GROUP INC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (619) 229-2288
After Hours Phone: (619) 229-2299
Provider Gender: Male
License number: G68636
NPI: 1689610362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado Hospital Llc, Oak Valley Dist Hosp, Scripps Memorial Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital Encinitas, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

RADIOLOGY DIAGNOSTIC

BECKETT, RYAN D

Provider ID: 283216
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172431
NPI: 1932561347
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BECKETT, RYAN D

Provider ID: 283218
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A172431
NPI: 1932561347
Provider English Spoken: Yes
Provider Language(s) Spoken:

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHENG, KAREN Y

Provider ID: 283226

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A144517

NPI: 1427430511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

CHENG, KAREN Y

Provider ID: 283228

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: A144517

NPI: 1427430511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

COVELL, DUSTIN M

Provider ID: 239900

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A160221

NPI: 1942615893

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

COVELL, DUSTIN M

Provider ID: 239902

Board Certified Specialty: No
UCSD MEDICAL GROUP

330 LEWIS ST # 202

SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A160221

NPI: 1942615893

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Ucsd Medical Group

EAJAZI, ALIREZA

Provider ID: 283521
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A171288
NPI: 1669835005
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

EAJAZI, ALIREZA

Provider ID: 283523
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

License number: A171288
NPI: 1669835005
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MORENO, MARIO A

Provider ID: 283315
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A151572
NPI: 1871957308
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MORENO, MARIO A

Provider ID: 283317
Board Certified Specialty: No
UCSD MEDICAL GROUP
330 LEWIS ST # 202
SAN DIEGO, CA 92103-2108
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A151572
NPI: 1871957308
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHULTZ, HEATHER M

Provider ID: 240342
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A139567
 NPI: 1871910810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SCHULTZ, HEATHER M
 Provider ID: 240344
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A139567
 NPI: 1871910810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YORK, VINCENT M
 Provider ID: 283517
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A170712
 NPI: 1790146611
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

YORK, VINCENT M
 Provider ID: 283519
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 330 LEWIS ST # 202
 SAN DIEGO, CA 92103-2108

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A170712
 NPI: 1790146611
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RADIOLOGY

ALLEN, DERRICK R , MD
 Provider ID: 269614
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (619) 295-9729
 Fax: (619) 342-2131
 After Hours Phone: (619) 295-9729
 Provider Gender: Male
 License number: A69840
 NPI: 1215982970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 269615
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ALLEN, DERRICK R , MD

Provider ID: 269617
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 550 WASHINGTON ST STE 200
 SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225
Fax: (866) 558-4329
After Hours Phone: (619) 260-7225
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 243395
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858) 658-6500
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 243396
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 819-6501
Fax:
After Hours Phone: (619) 819-6501
Provider Gender: Male
License number: A96095
NPI: 1689627838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHOU, ERIC T

Provider ID: 243397
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: A96095
 NPI: 1689627838
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

COOPER, JAMES A

Provider ID: 242475
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
 Phone: (619) 294-8111
 Fax:
 After Hours Phone: (619) 294-8111
 Provider Gender: Male
 License number: A62473
 NPI: 1497708622
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: East Los Angeles Doctors Hsp, Memorial Hosp Of Gardena Inc, Riverside Community Hosp, Palmdale Regional Medical Center,

Barstow Community Hospital, Kindred Hospital South Bay, Loma Linda University Med Ctr Murrieta, Coast Plaza Hospital, Community Hospital Of Huntington Park, Foothill Regional Medical Center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269746
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269747
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269752
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
 Phone: (619) 229-2299
 Fax: (866) 558-4329
 After Hours Phone: (619) 229-2299
 Provider Gender: Male
 License number: G50925

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DOEMENY, JOHN M
 Provider ID: 269753
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1809 NATIONAL AVE # 2104
 SAN DIEGO, CA 92113-2113
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc
DOEMENY, JOHN M
 Provider ID: 269756
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
 Phone: (619) 294-8111
 Fax: (866) 558-4329
 After Hours Phone: (619) 294-8111
 Provider Gender: Male
 License number: G50925
 NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DOEMENY, JOHN M
 Provider ID: 269757
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 550 WASHINGTON ST STE 200
 SAN DIEGO, CA 92103-2243
 Phone: (619) 260-7225
 Fax: (866) 558-4329
 After Hours Phone: (619) 260-7225
 Provider Gender: Male
 License number: G50925

NPI: 1841243912
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FRANKE, MARK A
 Provider ID: 269632
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858) 658-6500
 Provider Gender: Male
 License number: A118792
 NPI: 1114246329
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica Ucla Med Ctr, Ronald Reagan Ucla Med Ctr, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269637
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
229-2299
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269638
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500

Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269640
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269641
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax: (866) 558-4329
After Hours Phone: (619)
294-8111
Provider Gender: Male
License number: A118792
NPI: 1114246329
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Alvarado Hospital
Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FRANKE, MARK A

Provider ID: 269642
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

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D. Directorio de proveedores de atención especializada

Phone: (619) 260-7225
 Fax: (866) 558-4329
 After Hours Phone: (619) 260-7225
 Provider Gender: Male
 License number: A118792
 NPI: 1114246329
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Santa Monica
 UCLA Med Ctr, Ronald Reagan
 UCLA Med Ctr, Alvarado Hospital
 LLC
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 244953
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6655 ALVARADO RD
 SAN DIEGO, CA 92120-5208
 Phone: (866) 558-4320
 Fax:
 After Hours Phone: (866)
 558-4320
 Provider Gender: Male
 License number: G77575
 NPI: 1194863902
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc, Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LUBISICH, JOHN P

Provider ID: 244954
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858)
 658-6500
 Provider Gender: Male
 License number: G77575
 NPI: 1194863902
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado
 Hospital Llc, Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269525
 Board Certified Specialty: No

COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858)
 658-6500
 Provider Gender: Male
 License number: G51551
 NPI: 1508817305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269526
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
 Phone: (858) 658-6500
 Fax: (866) 558-4329
 After Hours Phone: (858)
 658-6500
 Provider Gender: Male
 License number: G51551
 NPI: 1508817305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269530

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax: (866) 558-4329

After Hours Phone: (619)
229-2299

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269531

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113

Phone: (858) 658-6500

Fax: (866) 558-4329

After Hours Phone: (858)
658-6500

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269534

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225

Fax: (866) 558-4329

After Hours Phone: (619)
260-7225

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269536

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105

Phone: (619) 294-8111

Fax: (866) 558-4329

After Hours Phone: (619)
294-8111

Provider Gender: Male

License number: G51551

NPI: 1508817305

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RATTNER, ZACHARY G , MD

Provider ID: 269895
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
995 GATEWAY CENTER WAY
STE 207
SAN DIEGO, CA 92102-4544
Phone: (619) 263-9729
Fax: (619) 263-9730
After Hours Phone: (619)
263-9729
Provider Gender: Male
License number: G86843
NPI: 1003867276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Paradise
Valley Hospital, Scripps
Memorial Hospital Encinitas,
Scripps Mercy Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SABIR, SHARJEEL H

Provider ID: 269857
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105

Phone: (619) 862-6500
Fax:
After Hours Phone: (619)
862-6500
Provider Gender: Male
License number: C158962
NPI: 1154599314
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245624
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
150 W WASHINGTON ST
SAN DIEGO, CA 92103-2005
Phone: (619) 295-9729
Fax: (619) 295-2549
After Hours Phone: (619)
295-9729
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245625
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500

Fax:
After Hours Phone: (858)
658-6500
Provider Gender: Male
License number: G72997
NPI: 1215976766
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245626
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
4077 5TH AVE
SAN DIEGO, CA 92103-2105

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 294-8111

Fax:

After Hours Phone: (619)
294-8111

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245631

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6386 ALVARADO CT STE 121
SAN DIEGO, CA 92120-4906

Phone: (619) 229-2299

Fax:

After Hours Phone: (619)
229-2299

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SCHWARTZBERG, ROSS E

Provider ID: 245632

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243

Phone: (619) 260-7225

Fax:

After Hours Phone: (619)
260-7225

Provider Gender: Male

License number: G72997

NPI: 1215976766

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Alvarado
Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

STRAKA, CHRISTOPHER A

Provider ID: 276875

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
16918 DOVE CANYON RD STE
103
SAN DIEGO, CA 92127-3455

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

License number: A145989

NPI: 1801281399

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 17/120

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 265583

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1809 NATIONAL AVE # 2104
SAN DIEGO, CA 92113-2113

Phone: (858) 658-6500

Fax: (866) 558-4329

After Hours Phone: (858)

658-6500

Provider Gender: Female

License number: A69607

NPI: 1629029335

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269822
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 150 W WASHINGTON ST
 SAN DIEGO, CA 92103-2005
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
 658-6500
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269827
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3939 RUFFIN RD STE 102
 SAN DIEGO, CA 92123-1804
Phone: (858) 658-6500
Fax: (866) 558-4329
After Hours Phone: (858)
 658-6500
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269828
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6386 ALVARADO CT STE 121
 SAN DIEGO, CA 92120-4906
Phone: (619) 229-2299
Fax: (866) 558-4329
After Hours Phone: (619)
 229-2299
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269830
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4077 5TH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax: (866) 558-4329
After Hours Phone: (619)
 294-8111
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista, Vibra Hospital Of
 San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM

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D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TENA, ROWENA G , MD

Provider ID: 269832
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
550 WASHINGTON ST STE 200
SAN DIEGO, CA 92103-2243
Phone: (619) 260-7225
Fax: (866) 558-4329
After Hours Phone: (619)
260-7225
Provider Gender: Female
License number: A69607
NPI: 1629029335
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista, Vibra Hospital Of
San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VAKILIAN, SIAVOSH

Provider ID: 283205
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
3366 5TH AVE
SAN DIEGO, CA 92103-5713

Phone: (619) 230-0400
Fax: (858) 429-7936
After Hours Phone: (619)
230-0400
Provider Gender: Male
License number: A133482
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VAKILIAN, SIAVOSH

Provider ID: 283207
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123-1338
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858)
505-4100
Provider Gender: Male
License number: A133482
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED DIETITIAN / NUTRITIONIST

CALLAWAY, MALLORY R

Provider ID: 287926
Board Certified Specialty: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR
STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: 86005489
NPI: 1477207611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

FISHER, JENNIFER J

Provider ID: 286339
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 471-0438
Fax: (619) 543-3763
After Hours Phone: (619) 471-0438
Provider Gender: Female
License number: 962434
NPI: 1538312657
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Ucsd Medical Group

FISHER, JENNIFER J
Provider ID: 286340
Board Certified Specialty: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR
STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 962434
NPI: 1538312657
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Ucsd Medical Group

ROBERTS, TRACI L
Provider ID: 268240
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 86084895
NPI: 1003385691
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Ucsd Medical Group

SIEVERING, DENISE
Provider ID: 268250
Board Certified Specialty: No
UCSD MEDICAL GROUP
4168 FRONT ST
SAN DIEGO, CA 92103-2030

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 86061948
NPI: 1356478929
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Ucsd Medical Group

REGISTERED PHYSICAL THERAPIST

AGRIMIS, JESSICA E
Provider ID: 206957
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT295027
NPI: 1790203388
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

AGUERO, PETER D

Provider ID: 258298

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT43257

NPI: 1982120861

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

AGUERO, PETER D

Provider ID: 258299

Board Certified Specialty: No

UCSD MEDICAL GROUP

9333 GENESEE AVE # 310

SAN DIEGO, CA 92121-2111

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT43257

NPI: 1982120861

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BARTZ, BRYAN M

Provider ID: 273380

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT40270

NPI: 1669818993

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BARTZ, BRYAN M

Provider ID: 273381

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT40270

NPI: 1669818993

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BECHERER, KELLEY D

Provider ID: 270969

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

3760 CONVOY ST STE 101

SAN DIEGO, CA 92111-3743

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (855) 543-0333
 Fax:
 After Hours Phone: (855) 543-0333
 Provider Gender: Female
 License number: PT43240
 NPI: 1306219472
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Ucsd Medical Group

BERGERON, PATRICK R
 Provider ID: 206534
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: PT41083
 NPI: 1285061390
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BLOCKER, NIRIT S
 Provider ID: 76189
 Board Certified Specialty: No
 LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Provider Gender: Female
 License number: PT30272
 NPI: 1457689309
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hebrew
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): Logan Heights Family Health Center
 IPA:

BUNOSKY, ABIGAIL S
 Provider ID: 246022
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT40519
 NPI: 1780018416
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BUNOSKY, ABIGAIL S
 Provider ID: 258304
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT40519
 NPI: 1780018416
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BURGESS, CATHERINE E

Provider ID: 258347
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT35850
NPI: 1205287687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CORTEZ, AARON J

Provider ID: 279194
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

License number: PT293439
NPI: 1639693187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DAHMS, MADELYNN

Provider ID: 129949
Board Certified Specialty: No
LOGAN HEIGHTS FAMILY
HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Provider Gender: Female
License number: PT295463
NPI: 1245712702
Provider English Spoken: Yes
Provider Language(s) Spoken:
Sign Language
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): Logan Heights
Family Health Center
IPA:

DANG, ERIC A

Provider ID: 258363
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (858) 543-3333
Fax: (858) 657-1809
After Hours Phone: (858) 543-3333
Provider Gender: Male
License number: PT292174
NPI: 1891237756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DANG, KAYLEE T

Provider ID: 279261
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: PT295178
 NPI: 1316426356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

DELASANTOS, CAMERON J

Provider ID: 269849
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 295 G ST
 SAN DIEGO, CA 92101-6808
 Phone: (619) 238-4318
 Fax: (619) 238-4320
 After Hours Phone: (619)
 238-4318
 Provider Gender: Male
 License number: PT293413
 NPI: 1689199192
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):

IPA: Community Care Ipa Llc
ELANDT, EMILY
 Provider ID: 285183
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: PT298134
 NPI: 1942818505
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HARRAH, WILLIAM A

Provider ID: 269689
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9333 GENESEE AVE # 350B
 SAN DIEGO, CA 92121-2111
 Phone: (858) 455-8584
 Fax: (858) 455-7302
 After Hours Phone: (858)
 455-8584
 Provider Gender: Male
 License number: PT9919
 NPI: 1831297027

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HEIM, JESSICA L

Provider ID: 124037
 Board Certified Specialty: No
 SAN DIEGO SPINE AND
 SPORT INC
 3760 CONVOY ST STE 100
 SAN DIEGO, CA 92111-3743
 Phone: (858) 573-9368
 Fax:
 After Hours Phone: (858)
 573-9368
 Provider Gender: Female
 License number: PT294241
 NPI: 1295241537
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-F 7AM-6PM, SA
 7AM-2PM
 Website:
 www.spineandsport.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

HEIM, JESSICA L

Provider ID: 269760
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3760 CONVOY ST STE 100
 SAN DIEGO, CA 92111-3743
 Phone: (858) 573-9368
 Fax: (858) 874-0582
 After Hours Phone: (858) 573-9368
 Provider Gender: Female
 License number: PT294241
 NPI: 1295241537
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

JUNG, CALVIN D

Provider ID: 271605
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9909 MIRA MESA BLVD STE 120
 SAN DIEGO, CA 92131-1060
 Phone: (858) 693-0436
 Fax: (858) 693-0437
 After Hours Phone: (858) 693-0436
 Provider Gender: Male
 License number: PT42181
 NPI: 1972997690
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

KAMPH, ALEXANDRA D

Provider ID: 271606
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9909 MIRA MESA BLVD STE 120
 SAN DIEGO, CA 92131-1060
 Phone: (619) 448-4860
 Fax:
 After Hours Phone: (619) 448-4860
 Provider Gender: Female
 License number: PT41577
 NPI: 1801298112
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LLOYD, CHRISTOPHER J

Provider ID: 117122

Board Certified Specialty: No
 SAN DIEGO SPINE AND SPORT INC
 3760 CONVOY ST STE 100
 SAN DIEGO, CA 92111-3743
 Phone: (858) 573-9368
 Fax:
 After Hours Phone: (858) 573-9368
 Provider Gender: Male
 License number: PT43591
 NPI: 1205292356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 7AM-6PM, SA 7AM-2PM
 Website:
 www.spineandsport.com
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LLOYD, CHRISTOPHER J

Provider ID: 271014
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 295 G ST
 SAN DIEGO, CA 92101-6808
 Phone: (888) 208-8526
 Fax:
 After Hours Phone: (888) 208-8526
 Provider Gender: Male
 License number: PT43591
 NPI: 1205292356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Arabic, Portuguese, Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MC ELROY, CARTER J

Provider ID: 206522

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN
STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Male

License number: PT26005

NPI: 1114472230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Thai

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MC ELROY, CARTER J

Provider ID: 206523

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON

SAN DIEGO, CA 92127-1607

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: PT26005

NPI: 1114472230

Provider English Spoken: Yes

Provider Language(s) Spoken:

Thai

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MITCHELL, JEFFREY A

Provider ID: 127532

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR # 1

SAN DIEGO, CA 92121-3018

Phone: (858) 657-8200

Fax:

After Hours Phone: (858)

657-8200

Provider Gender: Male

License number: PT37484

NPI: 1497827638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

MOELLER, LISA K

Provider ID: 258405

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6530

Fax: (619) 543-7864

After Hours Phone: (619)

543-6530

Provider Gender: Female

License number: PT18807

NPI: 1033664677

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

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D. Directorio de proveedores de atención especializada

NALBANDIAN, SARAH

Provider ID: 210313
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
Phone: (855) 540-3333
Fax: (858) 657-1809
After Hours Phone: (855) 540-3333
Provider Gender: Female
License number: PT295291
NPI: 1871069922
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NALBANDIAN, SARAH

Provider ID: 210314
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (858) 657-1809
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT295291
NPI: 1871069922

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NEGRETE, KRISTINE C

Provider ID: 201316
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT295226
NPI: 1528536638
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NGUYEN, HARRY D

Provider ID: 271871
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: PT294903
NPI: 1629558499
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NUTHALL, KAITLIN M

Provider ID: 202326
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
Phone: (858) 249-0832
Fax: (858) 657-1809
After Hours Phone: (858) 249-0832
Provider Gender: Female
License number: PT291757
NPI: 1992210090
Provider English Spoken: Yes

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D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OWENS, JADRIANE C

Provider ID: 269738
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 585 SATURN BLVD STE A
 SAN DIEGO, CA 92154-4721
Phone: (619) 591-1190
Fax: (619) 565-1656
After Hours Phone: (619)
 591-1190
Provider Gender: Female
License number: PT292222
NPI: 1689112179
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RICKERTS, MATTHEW M

Provider ID: 287652
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: PT42905
NPI: 1063882579
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUDD, CHRISTOPHER D

Provider ID: 207560
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: PT291997
NPI: 1831539337
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RUTKOWSKI, KENNETH T

Provider ID: 258432
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: PT40227
NPI: 1629121488
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANO, NISHIKI

Provider ID: 276718
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT296276
NPI: 1497399091
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SHAH, ZALAK

Provider ID: 269676
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 295 G ST
 SAN DIEGO, CA 92101-6808
Phone: (619) 238-4318
Fax:
After Hours Phone: (619) 238-4318
Provider Gender: Female
License number: PT296627
NPI: 1952855975
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SKINNER, NICOLE J

Provider ID: 206547
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: PT18043
NPI: 1386964997
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

STREM, BRENDAN S

Provider ID: 117197
Board Certified Specialty: No
 SAN DIEGO SPINE AND SPORT INC
 3760 CONVOY ST STE 100

SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858) 573-9368
Provider Gender: Male
License number: PT38107
NPI: 1033498084
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 7AM-6PM, SA 7AM-2PM
Website:
 www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

STREM, BRENDAN S

Provider ID: 271424
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 3760 CONVOY ST STE 100
 SAN DIEGO, CA 92111-3743
Phone: (858) 573-9368
Fax: (858) 874-0582
After Hours Phone: (858) 573-9368
Provider Gender: Male
License number: PT38107
NPI: 1033498084
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

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D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

THOMASON, ERICA M

Provider ID: 271593
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9909 MIRA MESA BLVD
 SAN DIEGO, CA 92131-1056
 Phone: (619) 448-4860
 Fax:
 After Hours Phone: (619) 448-4860
 Provider Gender: Female
 License number: PT296321
 NPI: 1740747484
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

TROYER, CORY

Provider ID: 206469
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008

Phone: (858) 543-0333
 Fax: (888) 539-8781
 After Hours Phone: (858) 543-0333
 Provider Gender: Female
 License number: PT294205
 NPI: 1124577671
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

UNDERWOOD, KIRA R

Provider ID: 258531
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
 Phone: (858) 543-0333
 Fax: (858) 657-1809
 After Hours Phone: (858) 543-0333
 Provider Gender: Female
 License number: PT294137
 NPI: 1023526449
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

VALENTINE, ANN T

Provider ID: 258536
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
 Phone: (855) 543-0333
 Fax: (858) 657-1809
 After Hours Phone: (855) 543-0333
 Provider Gender: Female
 License number: PT35485
 NPI: 1649727462
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: No
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

VAN DYKE, JASON P

Provider ID: 76188
 Board Certified Specialty: No
 CITY HEIGHTS FAMILY
 HEALTH CENTERS INC
 5454 EL CAJON BLVD

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D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2400
 Fax:
 After Hours Phone: (619) 515-2400
 Provider Gender: Male
 License number: PT25155
 NPI: 1487658720
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, ME
 Hours: M-SA 9AM-5PM
 Website: www.fhcsd.org
 Email:
 Medical Group(s): City Heights Family Health Centers Inc
 IPA:

WALKER, JULIE C

Provider ID: 258489
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 8929 UNIVERSITY CENTER LN
 STE 200
 SAN DIEGO, CA 92122-1008
 Phone: (855) 543-0333
 Fax: (858) 535-6422
 After Hours Phone: (855) 543-0333
 Provider Gender: Female
 License number: PT292806
 NPI: 1720489503
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 259683
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT37862
 NPI: 1689962169
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

WILLIAMS, STACY M

Provider ID: 259684
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR # 1

SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: PT37862
 NPI: 1689962169
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

RHEUMATOLOGY

MIDDLETON, GREGORY D

Provider ID: 64085
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: C54037
 NPI: 1104891290
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PAZIRANDEH, MAHMOOD

Provider ID: 257534
Board Certified Specialty: Yes
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
3633 CAMINO DEL RIO S STE
300
SAN DIEGO, CA 92108-4014
Phone: (619) 287-9730
Fax: (619) 287-4516
After Hours Phone: (619)
287-9730
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

PAZIRANDEH, MAHMOOD

Provider ID: 47863
Board Certified Specialty: No
MICHAEL I KELLER MD INC
3633 CAMINO DEL RIO S STE
300
SAN DIEGO, CA 92108-4014
Phone: (619) 287-9730
Fax:
After Hours Phone: (619)
287-9730
Provider Gender: Male
License number: C52328
NPI: 1134109390
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Russian, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 8:30AM-4:30PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
Plan Direct

REDDY, DANA A

Provider ID: 112705
Board Certified Specialty: No
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2560
Fax:
After Hours Phone: (619)
515-2560
Provider Gender: Female
License number: A115598

NPI: 1144538778
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Scripps Mercy
Hospital, Sharp Memorial
Hospital, Scripps Memorial
Hospital, Scripps Memorial
Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: P, EB, IB, E, R,
T, ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Diamond
Neighborhoods Family Hlth Ctrs
Inc
IPA: Imperial Health Holdings
Medical Group-Sd

SPEECH PATHOLOGIST

DE VERA, JONATHAN M

Provider ID: 118426
Board Certified Specialty: No
UCSD MEDICAL GROUP
8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333
Fax:
After Hours Phone: (855)
543-0333
Provider Gender: Male
License number: SP18630
NPI: 1639470024
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DE VERA, JONATHAN M

Provider ID: 258345

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Male

License number: SP18630

NPI: 1639470024

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248061

Board Certified Specialty: No

UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122-1013

Phone: (858) 657-8590

Fax:

After Hours Phone: (858)

657-8590

Provider Gender: Female

License number: SP26061

NPI: 1073150801

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

DOCKTER, ANDI M

Provider ID: 248063

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 974-9766

Fax:

After Hours Phone: (858)
974-9766

Provider Gender: Female

License number: SP26061

NPI: 1073150801

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

NEESE, SUSAN Y

Provider ID: 258441

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN

STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Female

License number: SP15489

NPI: 1710422134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SANTIMAW, LAUREN C

Provider ID: 116483

Board Certified Specialty: No

UCSD MEDICAL GROUP

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D. Directorio de proveedores de atención especializada

8929 UNIVERSITY CENTER LN
STE 200
SAN DIEGO, CA 92122-1008
Phone: (855) 543-0333

Fax:

After Hours Phone: (855)
543-0333

Provider Gender: Female

License number: SP22677

NPI: 1568705028

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SANTIMAW, LAUREN C

Provider ID: 258517

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN
STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Female

License number: SP22677

NPI: 1568705028

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SCHAEFER, LINDSEY A

Provider ID: 258506

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN
STE 200

SAN DIEGO, CA 92122-1008

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)

543-0333

Provider Gender: Female

License number: SP17349

NPI: 1598200719

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

UNGER, LINDSEY A

Provider ID: 207202

Board Certified Specialty: No

UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER LN
STE 200

SAN DIEGO, CA 92122-1008

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

License number: SP20362

NPI: 1972936813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Sign Language

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SURGERY CARDIOVASCULAR

COLETTA, JOELLE M

Provider ID: 206002

Board Certified Specialty: No

RADY CHILDRENS HEALTH
NETWORK

3030 CHILDRENS WAY STE
202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax:

After Hours Phone: (858)

966-8030

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A55001
NPI: 1447222377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Sharp Memorial
 Hospital, Ucsd Medical Ctr, Rady
 Childrens Hospital San Diego,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

COLETTA, JOELLE M

Provider ID: 210527
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-7777
Fax:
After Hours Phone: (619)
 543-7777
Provider Gender: Female
License number: A55001
NPI: 1447222377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
 Green Hospital, Sharp Memorial
 Hospital, Ucsd Medical Ctr, Rady
 Childrens Hospital San Diego,
 Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

FOX, KENNETH A

Provider ID: 257841
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8030
Fax:
After Hours Phone: (858)
 966-8030
Provider Gender: Male
License number: G154681
NPI: 1235153552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

Medical Group(s):
IPA: Rady Childrens Health
 Network

GOLTS, EUGENE M

Provider ID: 210076
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-7777
Fax:
After Hours Phone: (619)
 543-7777
Provider Gender: Male
License number: A82530
NPI: 1316000649
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Ukrainian
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Tri City
 Medical Ctr, Ucsd Medical Ctr,
 Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network, Ucsd Medical Group

MADANI, MICHAEL M

Provider ID: 210285
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-2652
After Hours Phone: (619)
 543-3759
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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 Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A67201

NPI: 1518999069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Ucsd Medical Ctr,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

NIGRO, JOHN J

Provider ID: 114832

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223

Phone: (858) 966-5841

Fax:

After Hours Phone: (858)

966-5841

Provider Gender: Male

License number: G80887

NPI: 1881707818

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PERRICONE, ANTHONY

Provider ID: 205580

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY STE

202

SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)

966-8030

Provider Gender: Male

License number: G65464

NPI: 1104842129

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego,

Sharp Memorial Hospital, Tri City

Medical Ctr, Ucsd Medical Ctr,

Scripps Memorial Hospital

Encinitas

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

PRETORIUS, GERT D

Provider ID: 210570

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6886

Fax:

After Hours Phone: (619)

543-6886

Provider Gender: Male

License number: A113774

NPI: 1629385836

Provider English Spoken: Yes

Provider Language(s) Spoken:

Afrikaans

Cultural Competency: No

Hospital Affiliation: Rady

Childrens Hospital San Diego, Tri

City Medical Ctr, Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network, Ucsd Medical Group

PRETORIUS, GERT D

Provider ID: 217681

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

3030 CHILDRENS WAY STE

202

SAN DIEGO, CA 92123-4227

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
License number: A113774
NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

THISTLETHWAITE, PATRICIA A

Provider ID: 206159
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Female
License number: G84093
NPI: 1831121789
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL G

Provider ID: 286363
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR STE 2110
 SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A132251
NPI: 1194983932
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group
EISENSTEIN, SAMUEL G
Provider ID: 286364
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A132251
NPI: 1194983932
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

EISENSTEIN, SAMUEL G

Provider ID: 286384
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (858) 657-7237
Fax:
After Hours Phone: (858) 657-7237
Provider Gender: Male
License number: A132251

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NPI: 1194983932
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

ISHO, MATHEW S , MD
 Provider ID: 245185
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 510
 SAN DIEGO, CA 92103-2121
 Phone: (619) 686-4011
 Fax: (619) 686-4014
 After Hours Phone: (619)
 686-4011
 Provider Gender: Male
 License number: A93470
 NPI: 1841235645
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Arabic, Syriac
 Cultural Competency: No
 Hospital Affiliation: Sharp
 Memorial Hospital, Sharp
 Coronado Hosp And Healthcare
 Ctr, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/100
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

Medical Group(s):
 IPA: Community Care Ipa Llc
LIU, SHANGLEI
 Provider ID: 273363
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A128073
 NPI: 1043558653
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, University
 Hsp Of San Diego Co
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LOPEZ, NICOLE E
 Provider ID: 117760
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6886
 Fax:
 After Hours Phone: (619)
 543-6886
 Provider Gender: Female
 License number: A107945

NPI: 1518163005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LOPEZ, NICOLE E
 Provider ID: 286366
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR
 STE 2110
 SAN DIEGO, CA 92122-1396
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: A107945
 NPI: 1518163005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

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D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Ucsd Medical Group

LOPEZ, NICOLE E

Provider ID: 286387
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6886
Fax:
After Hours Phone: (619)
543-6886
Provider Gender: Female
License number: A107945
NPI: 1518163005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARRY, LISA A

Provider ID: 278553
Board Certified Specialty: No
UCSD MEDICAL GROUP
16950 VIA TAZON
SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female

License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PARRY, LISA A

Provider ID: 286341
Board Certified Specialty: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR
STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A131297
NPI: 1235369067
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

RAMAMOORTHY, SONIA L

Provider ID: 286370
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR
STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 529-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A65709
NPI: 1801812656
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY CRITICAL CARE

ADAMS, LAURA M

Provider ID: 284407
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A169184
 NPI: 1144616541
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HIGGINSON, SARA M
 Provider ID: 243002
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A123464
 NPI: 1578852471
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KOBAYASHI, LESLIE M
 Provider ID: 64011
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A90700
 NPI: 1255501474
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

POTENZA, BRUCE M
 Provider ID: 277298
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-7200
 Fax:
 After Hours Phone: (619) 543-7200
 Provider Gender: Male
 License number: G77333
 NPI: 1548281496
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

LEE, JEANNE G
 Provider ID: 64031
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Female
 License number: A96295
 NPI: 1649334657
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

POTENZA, BRUCE M
 Provider ID: 277298
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-7200
 Fax:
 After Hours Phone: (619) 543-7200
 Provider Gender: Male
 License number: G77333
 NPI: 1548281496
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POTENZA, BRUCE M

Provider ID: 64144
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G77333
NPI: 1548281496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TADLOCK, MATTHEW D

Provider ID: 272848
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: C54740
NPI: 1881666956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

VENTRO, GEORGE J

Provider ID: 284418
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A169299
NPI: 1548604648
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WEAVER, JESSICA L

Provider ID: 243239
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273
Provider Gender: Female
License number: A163176
NPI: 1396044657
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY GENERAL **VASCULAR**

AL-NOURI, OMAR

Provider ID: 275349
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A16931
NPI: 1770742264
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BANDYK, DENNIS F

Provider ID: 275342
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 215
 SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: G89003
NPI: 1649282039
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARLEBEN, ANDREW R

Provider ID: 275372
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR STE 215
 SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99417
NPI: 1497936900
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 273147
Board Certified Specialty: No
 UCSD MEDICAL GROUP

200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A124195
NPI: 1972821411
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 273148
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A124195
NPI: 1972821411
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

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D. Directorio de proveedores de atención especializada

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CAJAS-MONSON, LUIS C

Provider ID: 275263
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121-3023
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
License number: A124195
NPI: 1972821411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SALLOUM, ALEXANDER C ,

MD
Provider ID: 268765
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619)
582-4490
Provider Gender: Male
License number: A89300
NPI: 1124176151
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital Chula Vista, Scripps
Mercy Hospital, Paradise Valley
Hospital, Palomar Medical
Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

AL-NOURI, OMAR
Provider ID: 211903
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
926-8273

Provider Gender: Male
License number: 20A16931
NPI: 1770742264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ALVORD, PAUL B

Provider ID: 63778
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A66670
NPI: 1447443809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W

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D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

ARMANI, AVA

Provider ID: 282141

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (858) 822-6100

Fax:

After Hours Phone: (858)

822-6100

Provider Gender: Female

License number: A118231

NPI: 1861759383

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Medical Ctr At

Ucsf, Ucsf Medical Center At

Mission Bay, Ucsf Medical

Center At Mount Zion, Ucsd La

Jolla John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

AVULOV, VADIM

Provider ID: 125019

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

6699 ALVARADO RD STE 2309

SAN DIEGO, CA 92120-5241

Phone: (619) 396-6637

Fax: (619) 825-3406

After Hours Phone: (619)

396-6637

Provider Gender: Male

License number: 20A13344

NPI: 1700121472

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency: No

Hospital Affiliation: Alvarado

Hospital Llc, Paradise Valley

Hospital, Sharp Coronado Hosp

And Healthcare Ctr, Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

BANDYK, DENNIS F

Provider ID: 63794

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G89003

NPI: 1649282039

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BARNES, RYAN M

Provider ID: 129062

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)

565-0104

Provider Gender: Male

License number: 20A12870

NPI: 1831493501

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BARNES, RYAN M

Provider ID: 83877

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
SAN DIEGO GEN AND
VASCULAR SURGEONS MED
GRP INC

7910 FROST ST STE 250
SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104

Fax:

After Hours Phone: (858)
565-0104

Provider Gender: Male

License number: 20A12870

NPI: 1831493501

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp

Coronado Hosp And Healthcare
Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-TH 9AM-5PM, F

9AM-4PM, SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BARONE, ROBERT M

Provider ID: 287822

Board Certified Specialty: No

UCSD MEDICAL GROUP

7695 CARDINAL CT STE 390

SAN DIEGO, CA 92123-3356

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: G22669

NPI: 1528083573

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Scripps

Mercy Hospital, Scripps

Memorial Hospital, Sharp Mary

Birch Hosp For Women And

Newborns, Ucsd La Jolla John

Sally Thornton, Ucsd Medical Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

BENCH, GARY R

Provider ID: 269682

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)

565-0104

Provider Gender: Male

License number: A35873

NPI: 1225007974

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BENCH, SHAWN R , MD

Provider ID: 129060

Board Certified Specialty: Yes

COMMUNITY CARE IPA LLC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)

565-0104

Provider Gender: Male

License number: A108975

NPI: 1669700753

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital, Sharp

Coronado Hosp And Healthcare

Ctr, Kern Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BERNDTSON, ALLISON E

Provider ID: 110505

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: A105854

NPI: 1457518219

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd

Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

BERUMEN, JENNIFER A

Provider ID: 113474

Board Certified Specialty: No

UCSD MEDICAL GROUP

4510 EXECUTIVE DR # 7

SAN DIEGO, CA 92121-3021

Phone: (858) 657-7729

Fax:

After Hours Phone: (858)

657-7729

Provider Gender: Female

License number: A106782

NPI: 1558566372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

BERUMEN, JENNIFER A

Provider ID: 260052

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)

966-5811

Provider Gender: Female

License number: A106782

NPI: 1558566372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: Yes

Min/Max Age: 0/99

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

BERUMEN, JENNIFER A

Provider ID: 86651

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax: (858) 966-5815

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: A106782

NPI: 1558566372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical

Ctr, Ucsd La Jolla John Sally

Thornton, Rady Childrens

Hospital San Diego, Childrens

Hosp And Resrch Ctr At Oakland

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

♿ Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

BRODERICK, RYAN C

Provider ID: 128612

Board Certified Specialty: No

UCSD MEDICAL GROUP

4520 EXECUTIVE DR STE 111

SAN DIEGO, CA 92121-3019

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858) 657-8860
 Provider Gender: Male
 License number: A124721
 NPI: 1619252418
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRODERICK, RYAN C

Provider ID: 201617
 Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax:
 After Hours Phone: (858) 657-8860
 Provider Gender: Male
 License number: A124721
 NPI: 1619252418
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRODERICK, RYAN C

Provider ID: 247073
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A124721
 NPI: 1619252418
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BRODERICK, RYAN C

Provider ID: 286342
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR
 STE 2110

SAN DIEGO, CA 92122-1396
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A124721
 NPI: 1619252418
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BROWN, KRISTIAN L , MD

Provider ID: 97599
 Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
 Phone: (858) 637-4800
 Fax: (858) 637-4801
 After Hours Phone: (858) 637-4800
 Provider Gender: Male
 License number: A124291
 NPI: 1023272051
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings
 Medical Group-Sd

BRUBAKER, ALEAH

Provider ID: 285272
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR # 7
 SAN DIEGO, CA 92121-3021
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A137609
 NPI: 1790104305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Stanford
 Health Care, Lucile Salter
 Packard Childrens Hosp, Ucsd
 La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

BRUBAKER, ALEAH

Provider ID: 289164

Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8001 FROST ST
 SAN DIEGO, CA 92123-2746
 Phone: (858) 966-8354
 Fax: (858) 966-5815
 After Hours Phone: (858) 966-8354
 Provider Gender: Female
 License number: A137609
 NPI: 1790104305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Stanford
 Health Care, Lucile Salter
 Packard Childrens Hosp, Ucsd
 La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

COIMBRA, RAUL S

Provider ID: 63858
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A74573
 NPI: 1356372791
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

COSMAN, BARD C

Provider ID: 65153
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4168 FRONT ST FL 3
 SAN DIEGO, CA 92103-2030
 Phone: (619) 543-3995
 Fax:
 After Hours Phone: (619) 543-3995
 Provider Gender: Male
 License number: G66321
 NPI: 1477513810
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

COSTANTINI, TODD W

Provider ID: 63865
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A95420
NPI: 1396900064
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CUBAS, ROBERT F

Provider ID: 127315
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Male
License number: A133442
NPI: 1407114382
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

DIERKSHEIDE, JULIE E

Provider ID: 101276
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A128857
NPI: 1346465168
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Kern Medical Center, Glendale Memorial Hosp And Health Ctr, Ucsd Medical Ctr, Long Beach Memorial Med Ctr, Earl And Lorraine Miller Childrens Hsp, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

DOUCET, JAY J

Provider ID: 63882
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A69243
NPI: 1205993813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FAIRBANKS, TIMOTHY J

Provider ID: 260842
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 1
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male

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D. Directorio de proveedores de atención especializada

License number: A80244
 NPI: 1407010556
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Ucsd Medical Ctr, Sharp
 Memorial Hospital, Scripps
 Memorial Hospital, Childrens
 Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GANTA, SRUJAN

Provider ID: 256383
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5855
 Fax:
 After Hours Phone: (858)
 966-5855
 Provider Gender: Male
 License number: A166273
 NPI: 1265071005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):

No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

GENZ, MICHAEL H

Provider ID: 285779
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A172108
 NPI: 1457715609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr

Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

GIESEMANN, LESLIE A

Provider ID: 215127
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY

SAN DIEGO, CA 92123-4232
 Phone: (858) 966-7711
 Fax: (858) 966-7712
 After Hours Phone: (858)
 966-7711
 Provider Gender: Female
 License number: A62713
 NPI: 1710901590
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Desert
 Regional Med Ctr, Alvarado
 Hospital Llc, Paradise Valley
 Hospital, Rady Childrens
 Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

GIESEMANN, LESLIE A

Provider ID: 215128
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 8110 BIRMINGHAM WAY FL 2
 SAN DIEGO, CA 92123-2758
 Phone: (858) 966-7711
 Fax: (858) 966-7712
 After Hours Phone: (858)
 966-7711
 Provider Gender: Female
 License number: A62713
 NPI: 1710901590
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Desert Regional Med Ctr, Alvarado Hospital Llc, Paradise Valley Hospital, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GODAT, LAURA N

Provider ID: 110346
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (619) 543-6832
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A120673
NPI: 1548440100
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GOLTS, EUGENE M

Provider ID: 63922
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A82530
NPI: 1316000649
Provider English Spoken: Yes
Provider Language(s) Spoken: Ukrainian
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HALLDORSON, JEFFREY B

Provider ID: 120709
Board Certified Specialty: No
 BALBOA NEPHROLOGY MED GRP INC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284

Phone: (858) 637-4700
Fax:
After Hours Phone: (858) 637-4700
Provider Gender: Male
License number: G86089
NPI: 1558446351
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

HALLDORSON, JEFFREY B , MD

Provider ID: 270147
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4800
Fax: (858) 637-4801
After Hours Phone: (858) 637-4800
Provider Gender: Male
License number: G86089
NPI: 1558446351
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

HART, MARQUIS E

Provider ID: 279694
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858)
 637-4700
Provider Gender: Male
License number: A42694
NPI: 1356401442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Community Care Ipa Llc

HORGAN, SANTIAGO

Provider ID: 286367
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4303 LA JOLLA VILLAGE DR
 STE 2110
 SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: F11
NPI: 1932297231
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

HORGAN, SANTIAGO

Provider ID: 286379
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-0700
Fax:
After Hours Phone: (619)
 471-0700
Provider Gender: Male
License number: F11

NPI: 1932297231
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Ucsd Medical Group

HORGAN, SANTIAGO

Provider ID: 63962
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-0701
Fax: (619) 543-3763
After Hours Phone: (619)
 471-0701
Provider Gender: Male
License number: F11
NPI: 1932297231
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

IGNACIO, ROMEO C

Provider ID: 217053
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A110729
NPI: 1538147145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JACOBSEN, GARTH R

Provider ID: 128247
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019

Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 201729
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121-3019
Phone: (858) 657-8860
Fax:
After Hours Phone: (858) 657-8860
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 286355
Board Certified Specialty: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR
STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99668
NPI: 1265649966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

JACOBSEN, GARTH R

Provider ID: 286356
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A99668
 NPI: 1265649966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Ucsd Medical Group

KOSOY, DANIEL H , MD

Provider ID: 82513
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8010 FROST ST STE 510
 SAN DIEGO, CA 92123-4284
 Phone: (858) 499-1900
 Fax: (858) 637-4801
 After Hours Phone: (858) 499-1900
 Provider Gender: Male
 License number: A60375
 NPI: 1770627259
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Community Care Ipa Llc

LANGENBERG, BRET J

Provider ID: 43656
 Board Certified Specialty: No
 PACIFIC COAST SURGICAL GROUP
 4033 3RD AVE STE 204
 SAN DIEGO, CA 92103-2130
 Phone: (619) 295-8677
 Fax: (619) 295-7935
 After Hours Phone: (619) 295-8677
 Provider Gender: Male
 License number: 20A9381
 NPI: 1720014038
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA:

LAZAR, DAVID A

Provider ID: 108403
 Board Certified Specialty: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8110 BIRMINGHAM WAY
 SAN DIEGO, CA 92123-2758
 Phone: (858) 966-8550
 Fax: After Hours Phone: (858) 966-8550
 Provider Gender: Male
 License number: A105968
 NPI: 1538365002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website: Email: Medical Group(s):
 IPA: Rady Childrens Health Network

MADANI, MICHAEL M

Provider ID: 64053
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax: After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A67201
 NPI: 1518999069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital, Tri City
Medical Ctr, Ucsd Medical Ctr,
Ucsd La Jolla John Sally
Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network, Ucsd Medical Group

MEKEEL, KRISTIN L

Provider ID: 64078

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)
543-6222

Provider Gender: Female

License number: C54096

NPI: 1104861947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MEKEEL, KRISTIN L

Provider ID: 80609

Board Certified Specialty: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN

8001 FROST ST

SAN DIEGO, CA 92123-2746

Phone: (858) 966-5855

Fax:

After Hours Phone: (858)

966-5855

Provider Gender: Female

License number: C54096

NPI: 1104861947

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health
Network

MUELLER, GEORGE A , MD

Provider ID: 54298

Board Certified Specialty: No

SAN DIEGO GEN AND

VASCULAR SURGEONS MED
GRP INC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax: (858) 565-0097

After Hours Phone: (858)
565-0104

Provider Gender: Male

License number: A41127

NPI: 1629179684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MUELLER, GEORGE A

Provider ID: 54298

Board Certified Specialty: No

SAN DIEGO GEN AND

VASCULAR SURGEONS MED
GRP INC

7910 FROST ST STE 250

SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104

Fax:

After Hours Phone: (858)

565-0104

Provider Gender: Male

License number: A41127

NPI: 1629179684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: No

Hospital Affiliation: Sharp

Memorial Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

NGUYEN, TRI T

Provider ID: 257595
 Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 7345 LINDA VISTA RD STE A
 SAN DIEGO, CA 92111-5800
 Phone: (858) 277-5463
 Fax: (858) 279-8296
 After Hours Phone: (858) 277-5463
 Provider Gender: Male
 License number: G79496
 NPI: 1962598425
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese, Vietnamese
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa

Llc, Imperial Health Holdings Medical Group-Sd

OWENS, ERIK L

Provider ID: 64123
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G84727
 NPI: 1578506523
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

PAREKH, JUSTIN R

Provider ID: 127150
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4510 EXECUTIVE DR # 7
 SAN DIEGO, CA 92121-3021
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A98665
 NPI: 1780866574
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At Ucsf, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

POLLACK, LARRY H , MD

Provider ID: 54346
 Board Certified Specialty: Yes
 SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752
 Phone: (858) 565-0104
 Fax: (858) 565-0194
 After Hours Phone: (858) 565-0104
 Provider Gender: Male
 License number: A41696
 NPI: 1104998400
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

RASCHKE, ERIC T

Provider ID: 270297
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: 20A17495
NPI: 1316386659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SAENZ, NICHOLAS C

Provider ID: 52842
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8110 BIRMINGHAM WAY
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711

Provider Gender: Male
License number: G84775
NPI: 1447321203
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SALLOUM, ALEXANDER C

Provider ID: 104108
Board Certified Specialty: No
BALBOA NEPHROLOGY MED GRP INC
6402 EL CAJON BLVD # 100
SAN DIEGO, CA 92115-2645
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
License number: A89300
NPI: 1124176151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Paradise Valley Hospital, Palomar Medical Center, Pomerado Hospital

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 7:30AM-4PM, SA 9AM-5PM
Website: bnmg.org
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SANDLER, BRYAN J

Provider ID: 286357
Board Certified Specialty: No
UCSD MEDICAL GROUP
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122-1396
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99837
NPI: 1043410186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANDLER, BRYAN J

Provider ID: 286383
Board Certified Specialty: No

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A99837
NPI: 1043410186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANDLER, BRYAN J

Provider ID: 64178
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A99837
NPI: 1043410186
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No

Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SANTORELLI, JARRETT E

Provider ID: 272303
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A161482
NPI: 1033529201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SCHNICKEL, GABRIEL T

Provider ID: 119527
Board Certified Specialty: No
UCSD MEDICAL GROUP
4510 EXECUTIVE DR # 7

SAN DIEGO, CA 92121-3021
Phone: (858) 657-6487
Fax:
After Hours Phone: (858) 657-6487
Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHNICKEL, GABRIEL T

Provider ID: 125421
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8354
Fax:
After Hours Phone: (858) 966-8354
Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SEDRAK, MICHAEL F

Provider ID: 84774
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 471-0701
Fax: (619) 543-7785
After Hours Phone: (619) 471-0701
Provider Gender: Male
License number: A82582
NPI: 1750464111
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

TALAMINI, MARK A

Provider ID: 64217
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: C51961
NPI: 1588694673
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

THANGARAJAH, HARIHARAN

Provider ID: 102551
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 8110 BIRMINGHAM WAY
 SAN DIEGO, CA 92123-2758
Phone: (858) 966-5840
Fax:
After Hours Phone: (858) 966-5840
Provider Gender: Male
License number: A94137
NPI: 1598979593
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

WALLACE, ANNE M

Provider ID: 64249
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: G73000
NPI: 1699732941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

WOODWARD, STEPHANIE M , MD

Provider ID: 63697
Board Certified Specialty: Yes
SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Female
License number: A103828
NPI: 1053435099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WOODWARD, STEPHANIE M

Provider ID: 63697
Board Certified Specialty: No
SAN DIEGO GEN AND VASCULAR SURGEONS MED GRP INC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752

Phone: (858) 565-0104
Fax:
After Hours Phone: (858) 565-0104
Provider Gender: Female
License number: A103828
NPI: 1053435099
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

YANG, GENE

Provider ID: 280567
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A169156
NPI: 1568807089
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL K

Provider ID: 284934
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A154951
NPI: 1578058665
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY HAND

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

ABRAMS, REID

Provider ID: 63766
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G59829
NPI: 1548202245
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Scripps Green Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BARBA, DAVID

Provider ID: 63798
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222

Provider Gender: Male
License number: G42092
NPI: 1093730251
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244087
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-5720
Fax:
After Hours Phone: (619) 543-5720
Provider Gender: Male
License number: G42092
NPI: 1093730251

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:

SURGERY HEAD

COFFEY, CHARLES S

Provider ID: 63857
Board Certified Specialty: No
 UCSD OTOLARYNGOLOGY
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 657-8590
Fax:
After Hours Phone: (858) 657-8590
Provider Gender: Male
License number: A116621
NPI: 1932297330

BELVERUD, SHAWN A

Provider ID: 202333
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273 Fax: After Hours Phone: (800) 926-8273 Provider Gender: Male License number: 20A13471 NPI: 1073817268 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	At Oakland Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network KHALESSI, ALEXANDER A Provider ID: 206141 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 7910 FROST ST STE 120 SAN DIEGO, CA 92123-2776 Phone: (858) 966-8574 Fax: After Hours Phone: (858) 966-8574 Provider Gender: Male License number: A95850 NPI: 1073786661 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: 0/18 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health	Network, Ucsd Medical Group KHALESSI, ALEXANDER A Provider ID: 244035 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-5540 Fax: After Hours Phone: (619) 543-5540 Provider Gender: Male License number: A95850 NPI: 1073786661 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group KHALESSI, ALEXANDER A Provider ID: 63997 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (858) 657-7000 Fax: After Hours Phone: (858) 657-7000
GONDA, DAVID D Provider ID: 101200 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7910 FROST ST STE 430 SAN DIEGO, CA 92123-2795 Phone: (858) 966-6710 Fax: After Hours Phone: (858) 966-6710 Provider Gender: Male License number: A107984 NPI: 1427254937 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

KHALESSI, ALEXANDER A
Provider ID: 81383
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-8574
Fax:
After Hours Phone: (858) 966-8574
Provider Gender: Male
License number: A95850
NPI: 1073786661
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens

Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

LEVY, MICHAEL L
Provider ID: 262600
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 120
 SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574

Provider Gender: Male
License number: G62556
NPI: 1164593927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LEVY, MICHAEL L
Provider ID: 52607
Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7910 FROST ST STE 430
 SAN DIEGO, CA 92123-2795
Phone: (858) 966-6710
Fax:
After Hours Phone: (858) 966-6710
Provider Gender: Male
License number: G62556
NPI: 1164593927
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Childrens Hosp Of Los Angeles
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MARSHALL, LAWRENCE F
Provider ID: 244150
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273

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D. Directorio de proveedores de atención especializada

Provider Gender: Male
License number: C36547
NPI: 1750306171
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

MARSHALL, LAWRENCE F

Provider ID: 64064
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: C36547
NPI: 1750306171
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Ucsd Medical Group
MELTZER, HAL
Provider ID: 205339
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 120
 SAN DIEGO, CA 92123-2776
Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574

Provider Gender: Male
License number: G70636
NPI: 1588735344
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

NGUYEN, ANDREW D

Provider ID: 244135
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NGUYEN, ANDREW D

Provider ID: 244137
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 962-8273
Fax:
After Hours Phone: (800) 962-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Ucsd

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

NGUYEN, ANDREW D

Provider ID: 64107
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OLSON, SCOTT E

Provider ID: 244053

Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A83715
NPI: 1376568659
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Tri City Medical Ctr, Palomar Health Downtown Campus, Ucsd Medical Ctr, Pomerado Hospital, Palomar Medical Center, Scripps Green Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

OSORIO, JOSEPH A

Provider ID: 242007
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A128616
NPI: 1437416591

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

PHAM, MARTIN H

Provider ID: 244158
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A121590
NPI: 1609130921
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

IPA: Ucsd Medical Group

RAVINDRA, VIJAY M

Provider ID: 277176

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

7910 FROST ST STE 120

SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574

Fax: (858) 966-7930

After Hours Phone: (858)

966-8574

Provider Gender: Male

License number: A161999

NPI: 1982995841

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Memorial Hospital, Scripps

Mercy Hospital, Scripps Mercy

Hospital Chula Vista, Naval

Medical Ctr Sd Rbe, Rady

Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

SCHWARTZ, MARC S

Provider ID: 121885

Board Certified Specialty: No

UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G86573

NPI: 1508960188

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Good

Samaritan Hospital Los Angeles,

Valley Presbyterian Hosp, Martin

Luther King Jr Community

Hospital, Huntington Memorial

Hospital, Providence Saint Johns

Health Center, Ucsd Medical Ctr,

Ucsd La Jolla John Sally

Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

SOUMEKH, MASSOUD

HERTZEL

Provider ID: 257468

Board Certified Specialty: Yes

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

8008 FROST ST STE 401

SAN DIEGO, CA 92123-4209

Phone: (858) 560-8544

Fax: (858) 560-8546

After Hours Phone: (858)

560-8544

Provider Gender: Male

License number: A37843

NPI: 1265495014

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med

Ctr, Alvarado Hosp Med Ctr,

Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct, Community Care Ipa

Llc

SOUMEKH, MASSOUD

HERTZEL, MD

Provider ID: 54178

Board Certified Specialty: Yes

MOUNTAIN HLTH & COMM

SERVICES

8008 FROST ST STE 401

SAN DIEGO, CA 92123-4209

Phone: (858) 560-8544

Fax: (858) 560-8546

After Hours Phone: (858)

560-8544

Provider Gender: Male

License number: A37843

NPI: 1265495014

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Sharp Memorial

Hospital, Sharp Chula Vista Med

Ctr, Alvarado Hosp Med Ctr,

Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health
 Plan Direct, Community Care Ipa
 Llc

TOMLIN, JEFFREY M

Provider ID: 272950
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR FL 1
 SAN DIEGO, CA 92103-1911
 Phone: (858) 657-8540
 Fax:
 After Hours Phone: (858)
 657-8540
 Provider Gender: Male
 License number: C161473
 NPI: 1366530321
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

U, HOI S

Provider ID: 244132
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G27898
 NPI: 1164468146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

U, HOI S

Provider ID: 64233
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: G27898
 NPI: 1164468146
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

SURGERY ORTHOPEDIC

ALLEN, RICHARD T

Provider ID: 63777
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6312
 Fax: (619) 543-7480
 After Hours Phone: (619)
 543-6312
 Provider Gender: Male
 License number: A83513
 NPI: 1962660175
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

ANDERSON, JUSTIN

Provider ID: 289121
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK

3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: PA60229
NPI: 1366105074
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Alvarado
Hosp Med Ctr, Rady Childrens
Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ATTENELLO, JOHN D

Provider ID: 271082
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A166979
NPI: 1629456553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla

John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

BAGHERI, ALI

Provider ID: 262208
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: A123272
NPI: 1760632947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital, Scripps
Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BALLARD, BROOKE L

Provider ID: 262204
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Female
License number: A104161
NPI: 1841447950
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: No
Hospital Affiliation: Alvarado
Hospital Llc, Sharp Coronado
Hosp And Healthcare Ctr, Sharp
Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-F 9AM-5PM, SA
9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

BALL, SCOTT T

Provider ID: 63792
Board Certified Specialty: Yes
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A75221
 NPI: 1952325318
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BATES, JAMES E

Provider ID: 262140
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 5555 RESERVOIR DR STE 104
 SAN DIEGO, CA 92120-5198
 Phone: (619) 286-9480
 Fax: (619) 286-4568
 After Hours Phone: (619) 286-9480
 Provider Gender: Male
 License number: G73930
 NPI: 1174692206
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999

American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

BUI, CHRISTOPHER N

Provider ID: 241162
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A127139
 NPI: 1619231537

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BUKATA, SUSAN V

Provider ID: 277948
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C55109
 NPI: 1932140639
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

BURNIKEL, DAVID J

Provider ID: 111158
 Board Certified Specialty: No
 SAN DIEGO SPORTS MEDICINE AND ORTHOPAEDIC CENTER INC
 6719 ALVARADO RD STE 200
 SAN DIEGO, CA 92120-5256
 Phone: (619) 229-3932
 Fax:
 After Hours Phone: (619) 229-3932
 Provider Gender: Male
 License number: A138043
 NPI: 1457541369
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Ctr, Grossmont Hospital, Scripps
 Mercy Hospital, Alvarado
 Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website: www.sdsdm.net
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BURNIKEL, DAVID J , MD
Provider ID: 205079
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 6719 ALVARADO RD STE 200
 SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619)
 229-3932
Provider Gender: Male
License number: A138043
NPI: 1457541369
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista, Sharp
 Coronado Hosp And Healthcare
 Ctr, Grossmont Hospital, Scripps
 Mercy Hospital, Alvarado
 Hospital Llc
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CHANG, DOUGLAS G
Provider ID: 63839
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
 657-8200
Provider Gender: Male
License number: A77281
NPI: 1962450031
Provider English Spoken: Yes
Provider Language(s) Spoken:
 German
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CHENG, YU TSUN
Provider ID: 205788
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858)
 966-5999
Provider Gender: Male
License number: A98564
NPI: 1992982854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Southwest Healthcare System
 Wildomar, Southwest Healthcare
 System Murrieta
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CHIARAPPA, FRANK E
Provider ID: 244459
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A164466
NPI: 1932536828
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd

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D. Directorio de proveedores de atención especializada

Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CHOI, JIHOON

Provider ID: 284788
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A151613
NPI: 1285097741
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

CIDAMBI, EMILY O

Provider ID: 246466
Board Certified Specialty: No

RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
 966-6789
Provider Gender: Female
License number: A127390
NPI: 1659634699
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

CIDAMBI, KRISHNA R

Provider ID: 118283
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax:
After Hours Phone: (619)
 543-6312
Provider Gender: Male
License number: A118350
NPI: 1275836959
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Tamil
Cultural Competency: No
Hospital Affiliation: Providence St

Joseph Hospital, Hoag
 Orthopedic Institute, Ucsd
 Medical Ctr, Ucsd La Jolla John
 Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COVEY, DANA C

Provider ID: 104615
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: G89432
NPI: 1780651794
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

COVEY, DANA C

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D. Directorio de proveedores de atención especializada

Provider ID: 104618
Board Certified Specialty: No
UCSD MEDICAL GROUP
8899 UNIVERSITY CENTER LN
STE 230
SAN DIEGO, CA 92122-1010
Phone: (858) 657-7726
Fax:
After Hours Phone: (858)
657-7726
Provider Gender: Male
License number: G89432
NPI: 1780651794
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

FINKENBERG, JOHN G

Provider ID: 262199
Board Certified Specialty: Yes
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619)
286-9480
Provider Gender: Male
License number: G56283
NPI: 1285703413
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Alvarado Hospital Llc,
Scripps Mercy Hospital, Sharp
Coronado Hosp And Healthcare
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

FLINT, JAMES H

Provider ID: 203178
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
657-8200
Provider Gender: Male
License number: A156864
NPI: 1629239140
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla
John Sally Thornton, Ucsd
Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Ucsd Medical Group

GARFIN, STEVEN R

Provider ID: 123782
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-8235
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G29309
NPI: 1679515829
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GIRARD, PAUL J

Provider ID: 63919
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax: (619) 543-7480
After Hours Phone: (619)
543-6312
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: A78346
 NPI: 1356319891
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

GOEB, YANNICK L

Provider ID: 284794
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A170529
 NPI: 1730542747
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:

Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HENTZEN, ERIC R
 Provider ID: 63954
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6312
 Fax: (619) 543-7480
 After Hours Phone: (619) 543-6312
 Provider Gender: Male
 License number: A83117
 NPI: 1245411180
 Provider English Spoken: Yes
 Provider Language(s) Spoken: German, Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

HOLLNAGEL, KATHARINE F

Provider ID: 284171
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (858) 966-5999
 Fax: (858) 966-8519
 After Hours Phone: (858) 966-5999

Provider Gender: Female
 License number: A172578
 NPI: 1295180289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

HOLLNAGEL, KATHARINE F

Provider ID: 284172
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Female
 License number: A172578
 NPI: 1295180289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 ♿ Accessibility:
 Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

JACOBSON, MARK D

Provider ID: 262260
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
5555 RESERVOIR DR STE 104
SAN DIEGO, CA 92120-5198
Phone: (619) 286-9480
Fax: (619) 286-4568
After Hours Phone: (619) 286-9480
Provider Gender: Male
License number: G71151
NPI: 1760551915
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings Medical Group-Sd

KENT, WILLIAM T

Provider ID: 110385
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (858) 657-8200
Fax:
After Hours Phone: (858) 657-8200
Provider Gender: Male
License number: A122546
NPI: 1962794198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

KIMBALL, MICHAEL P , MD

Provider ID: 38205
Board Certified Specialty: No
GIRARD ORTHOPAEDIC SURGEONS MED GRP
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KIMBALL, MICHAEL P

Provider ID: 38205
Board Certified Specialty: No
GIRARD ORTHOPAEDIC SURGEONS MED GRP
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: G76060
NPI: 1588648653
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Imperial Health Holdings Medical Group-Sd

KULIDJIAN, ANNA A

Provider ID: 64022
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A97060
NPI: 1215183066
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LEE, SCOTT I

Provider ID: 102032
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A121741
NPI: 1760790349

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Glendale Adventist Med Ctr, Adventist Health White Memorial
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEUNIER, MATTHEW J

Provider ID: 64082
Board Certified Specialty: Yes
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A72975
NPI: 1265470553
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

MEYER, ROBERT S

Provider ID: 64084
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax: (619) 543-7480
After Hours Phone: (619) 543-6312
Provider Gender: Male
License number: G76677
NPI: 1316997646
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ORNER, CAITLIN A

Provider ID: 284169
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A172799
NPI: 1124481254
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ORNER, CAITLIN A

Provider ID: 284170
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY FL 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858)
 966-6789
Provider Gender: Female
License number: A172799
NPI: 1124481254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

PAGE, ALEXANDRA E

Provider ID: 109720
Board Certified Specialty: No
 SAN DIEGO SPORTS
 MEDICINE AND
 ORTHOPAEDIC CENTER INC
 6719 ALVARADO RD STE 200
 SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax:
After Hours Phone: (619)
 229-3932
Provider Gender: Female
License number: G84448
NPI: 1275681157
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Memorial Hospital, Grossmont
 Hospital, Sharp Coronado Hosp
 And Healthcare Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: W
Hours: M-F 8AM-5PM, SA
 9AM-5PM
Website: www.sdsd.net
Email:
Medical Group(s):
IPA:

POMERANTZ, MICHAEL L

Provider ID: 203072
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 657-8200
Fax:
After Hours Phone: (858)
 657-8200

Provider Gender: Male
License number: A109105
NPI: 1356505705
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Paradise
 Valley Hospital, Scripps Mercy
 Hospital, Sharp Memorial
 Hospital, Sharp Chula Vista Med
 Ctr, Sharp Coronado Hosp And
 Healthcare Ctr, Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

POURTAHERI, SINA

Provider ID: 119044
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6312
Fax:
After Hours Phone: (619)
 543-6312
Provider Gender: Male
License number: A136713
NPI: 1306153572
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

PRING, MAYA E

Provider ID: 52689
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-5999
Fax:
After Hours Phone: (858) 576-5999
Provider Gender: Female
License number: A77003
NPI: 1104997964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

RAISZADEH, RAMIN

Provider ID: 54392

Board Certified Specialty: No
LA JOLLA SPINE INSTITUTE
MED GRP INC
6719 ALVARADO RD STE 308
SAN DIEGO, CA 92120-5268
Phone: (619) 265-7912
Fax: (619) 265-7922
After Hours Phone: (619) 265-7912
Provider Gender: Male
License number: A88341
NPI: 1518021369
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 9AM-5PM, SA 9AM-5PM
Website: www.siosd.com
Email:
Medical Group(s):
IPA:

RICKARDS, ENASS N , MD

Provider ID: 268909
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080
Provider English Spoken: Yes
Provider Language(s) Spoken:

Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

RICKARDS, ENASS N

Provider ID: 65531
Board Certified Specialty: No
GIRARD ORTHOPAEDIC SURGEONS MED GRP
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Female
License number: G79785
NPI: 1609850080
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Female License number: A87544 NPI: 1952565780 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Ucsd Medical Ctr Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	Vista Med Ctr, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd
RICKERT, KATHLEEN D Provider ID: 108390 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 3030 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123-4232 Phone: (858) 966-4003 Fax: After Hours Phone: (858) 966-4003 Provider Gender: Female License number: A140439 NPI: 1023308921 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network	ROSENFELD, ALAN L , MD Provider ID: 242938 Board Certified Specialty: No COMMUNITY CARE IPA LLC 9333 GENESEE AVE STE 350 SAN DIEGO, CA 92121-2103 Phone: (858) 455-6460 Fax: (858) 455-7197 After Hours Phone: (858) 455-6460 Provider Gender: Male License number: G75293 NPI: 1588648968 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM	ROSENFELD, ALAN L Provider ID: 262177 Board Certified Specialty: No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 9333 GENESEE AVE STE 350 SAN DIEGO, CA 92121-2103 Phone: (858) 455-6460 Fax: (858) 455-7197 After Hours Phone: (858) 455-6460 Provider Gender: Male License number: G75293 NPI: 1588648968 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM
ROBERTSON, CATHERINE M Provider ID: 64163 Board Certified Specialty: Yes UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd	UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> (858) 966-6706 <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A60259 <i>NPI:</i> 1740206747 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i>	Sharp Chula Vista Med Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 18/120 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
RYNNING, RALPH E <i>Provider ID:</i> 262195 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 5555 RESERVOIR DR STE 104 SAN DIEGO, CA 92120-5198 <i>Phone:</i> (619) 286-9480 <i>Fax:</i> (619) 286-4568 <i>After Hours Phone:</i> (619) 286-9480 <i>Provider Gender:</i> Male <i>License number:</i> A103946 <i>NPI:</i> 1952595316 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> French, German, Norwegian, Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Alvarado Hospital Llc, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Imperial Health Holdings Medical Group-Sd	SHILLITO, MATTHEW C , MD <i>Provider ID:</i> 247893 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 6719 ALVARADO RD STE 200 SAN DIEGO, CA 92120-5256 <i>Phone:</i> (619) 229-3932 <i>Fax:</i> (619) 582-2860 <i>After Hours Phone:</i> (619) 229-3932 <i>Provider Gender:</i> Male <i>License number:</i> A109569 <i>NPI:</i> 1538318548 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Alvarado Hospital Llc, 	SIROTA, MICHAEL A , MD <i>Provider ID:</i> 84579 <i>Board Certified Specialty:</i> No SAN DIEGO SPORTS MEDICINE AND ORTHOPAEDIC CENTER INC 6719 ALVARADO RD STE 200 SAN DIEGO, CA 92120-5256 <i>Phone:</i> (619) 229-3932 <i>Fax:</i> (619) 582-2860 <i>After Hours Phone:</i> (619) 229-3932 <i>Provider Gender:</i> Male <i>License number:</i> A129445 <i>NPI:</i> 1558542423 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No ♿ <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
SCHWARTZ, ALEXANDRA K <i>Provider ID:</i> 64188 <i>Board Certified Specialty:</i> No		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SIROTA, MICHAEL A

Provider ID: 84579
Board Certified Specialty: No
SAN DIEGO SPORTS MEDICINE AND ORTHOPAEDIC CENTER INC
 6719 ALVARADO RD STE 200
 SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619) 229-3932
Provider Gender: Male
License number: A129445
NPI: 1558542423
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Sharp Memorial Hospital, Alvarado Hospital Llc
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.sdsm.net
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SPEIRS, JOSHUA N

Provider ID: 284217
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Phone: (858) 966-5999
Fax: (858) 966-8519
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A151041
NPI: 1164876918
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SPEIRS, JOSHUA N

Provider ID: 284218
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY # 3
 SAN DIEGO, CA 92123-4232
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
License number: A151041
NPI: 1164876918
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SULLIVAN, THOMAS B

Provider ID: 285247
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A138132
NPI: 1437565488
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TASTO, JAMES P , MD

Provider ID: 218096
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
 6719 ALVARADO RD STE 200

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619) 229-3932
Provider Gender: Male
License number: G14672
NPI: 1124021936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TASTO, JAMES P

Provider ID: 44083
Board Certified Specialty: No
 SAN DIEGO SPORTS
 MEDICINE AND
 ORTHOPAEDIC CENTER INC
 6719 ALVARADO RD STE 200
 SAN DIEGO, CA 92120-5256
Phone: (619) 229-3932
Fax: (619) 582-2860
After Hours Phone: (619) 229-3932
Provider Gender: Male
License number: G14672
NPI: 1124021936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc,

Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website: www.sdsm.net
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

TAYYAB, NEIL A , MD

Provider ID: 268617
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9333 GENESEE AVE # 350A
 SAN DIEGO, CA 92121-2111
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical

Group-Sd

TAYYAB, NEIL A

Provider ID: 35361
Board Certified Specialty: No
 GIRARD ORTHOPAEDIC
 SURGEONS MED GRP
 9333 GENESEE AVE STE 350
 SAN DIEGO, CA 92121-2103
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858) 455-6460
Provider Gender: Male
License number: A94408
NPI: 1831149970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Sharp Memorial Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

TRETIKOV, MIKHAIL

Provider ID: 284222
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (858) 966-5999
 Fax: (858) 966-8519
 After Hours Phone: (858) 966-5999
 Provider Gender: Male
 License number: A171934
 NPI: 1912353772
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

TRETIKOV, MIKHAIL

Provider ID: 284223
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY # 3
 SAN DIEGO, CA 92123-4232
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Male
 License number: A171934
 NPI: 1912353772
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18

American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

VITALE, KENNETH C

Provider ID: 104655
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (858) 657-8200
 Fax:
 After Hours Phone: (858) 657-8200
 Provider Gender: Male
 License number: C132964
 NPI: 1730176868
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

YASZAY, BURT

Provider ID: 206303
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY

SAN DIEGO, CA 92123-4223
 Phone: (858) 576-5999
 Fax: (858) 576-8412
 After Hours Phone: (858) 576-5999
 Provider Gender: Male
 License number: A100336
 NPI: 1770798647
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL):
 No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

YASZAY, BURT

Provider ID: 206305
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3030 CHILDRENS WAY STE
 410
 SAN DIEGO, CA 92123-4228
 Phone: (858) 966-6789
 Fax: (858) 966-6706
 After Hours Phone: (858) 966-6789
 Provider Gender: Male
 License number: A100336
 NPI: 1770798647
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

YASZAY, BURT

Provider ID: 206307
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7910 FROST ST STE 190
SAN DIEGO, CA 92123-2731
Phone: (858) 966-9360
Fax: (858) 966-8519
After Hours Phone: (858)
966-9360
Provider Gender: Male
License number: A100336
NPI: 1770798647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

ZLOMISLIC, VINKO

Provider ID: 78122
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax: (858) 657-8235
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: A112819
NPI: 1346351509
Provider English Spoken: Yes
Provider Language(s) Spoken:
Serbo-Croatian, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr, Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SURGERY PEDIATRIC

BICKLER, STEPHEN W

Provider ID: 270090
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711

Provider Gender: Male
License number: G58535
NPI: 1891866653
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/25
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

GOLLIN, GERALD

Provider ID: 109561
Board Certified Specialty: No
RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN
8110 BIRMINGHAM WAY
SAN DIEGO, CA 92123-2758
Phone: (858) 966-5840
Fax:
After Hours Phone: (858)
966-5840
Provider Gender: Male
License number: G84953
NPI: 1477598662
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None

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D. Directorio de proveedores de atención especializada

American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLLIN, GERALD

Provider ID: 205905
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 8110 BIRMINGHAM WAY # 2
 SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84953
NPI: 1477598662
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOLTS, EUGENE M

Provider ID: 217715

Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax:
After Hours Phone: (858) 966-8030
Provider Gender: Male
License number: A82530
NPI: 1316000649
Provider English Spoken: Yes
Provider Language(s) Spoken: Ukrainian
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No

Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

GONDA, DAVID D

Provider ID: 205821
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7910 FROST ST STE 120
 SAN DIEGO, CA 92123-2776

Phone: (858) 966-8574
Fax: (858) 966-7930
After Hours Phone: (858) 966-8574
Provider Gender: Male
License number: A107984
NPI: 1427254937
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOSMAN, AMANDA A

Provider ID: 205841
Board Certified Specialty: Yes
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady

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D. Directorio de proveedores de atención especializada

Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KELLER, BENJAMIN A
Provider ID: 272196
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858)
966-5999
Provider Gender: Male
License number: A118158
NPI: 1285953364
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KELLER, BENJAMIN A
Provider ID: 285941
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711
Provider Gender: Male
License number: A118158
NPI: 1285953364
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KLING, KAREN M
Provider ID: 205340
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711
Provider Gender: Female
License number: A53583

NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, National Naval Med
Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

KLING, KAREN M
Provider ID: 283380
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858)
966-7711
Provider Gender: Female
License number: A53583
NPI: 1982775144
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Sharp Mary
Birch Hosp For Women And
Newborns, National Naval Med
Ctr, Sharp Memorial Hospital

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D. Directorio de proveedores de atención especializada

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAZAR, DAVID A

Provider ID: 205606
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A105968
NPI: 1538365002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

LAZAR, DAVID A

Provider ID: 283140

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: A105968
NPI: 1538365002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

MADANI, MICHAEL M

Provider ID: 206267
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-3759
Fax: (619) 543-2652
After Hours Phone: (619) 543-3759
Provider Gender: Male
License number: A67201
NPI: 1518999069
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

SAENZ, NICHOLAS C

Provider ID: 206176
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
License number: G84775
NPI: 1447321203
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SAENZ, NICHOLAS C

Provider ID: 283170

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

License number: G84775

NPI: 1447321203

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Sharp Memorial Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

THANGARAJAH, HARIHARAN

Provider ID: 206172

Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK

8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123-2758

Phone: (858) 966-7711

Fax: (858) 966-7712

After Hours Phone: (858)
966-7711

Provider Gender: Male

License number: A94137

NPI: 1598979593

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

THANGARAJAH, HARIHARAN

Provider ID: 256194

Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123-4232

Phone: (858) 966-7711

Fax:

After Hours Phone: (858)
966-7711

Provider Gender: Male

License number: A94137

NPI: 1598979593

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):
No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health Network

SURGERY PLASTIC

GOSMAN, AMANDA A

Provider ID: 52812

Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN

7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289

Phone: (858) 966-7484

Fax:

After Hours Phone: (858)
966-7484

Provider Gender: Female

License number: A96153

NPI: 1164436291

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: No

Hospital Affiliation: Rady
Childrens Hospital San Diego,
Ucsd Medical Ctr, Ucsd La Jolla
John Sally Thornton

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):
No

Accessibility: P, EB, IB, E, R,
T, W

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GOSMAN, AMANDA A

Provider ID: 63926
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Female
License number: A96153
NPI: 1164436291
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

GUPTA, DEEPAK

Provider ID: 110728
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A114745
NPI: 1043445950
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Santa Clara Valley Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

HINCHCLIFF, KATHARINE

Provider ID: 277288
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A135631
NPI: 1346674561
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HINCHCLIFF, KATHARINE

Provider ID: 277965
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
7920 FROST ST STE 200
SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Female
License number: A135631
NPI: 1346674561
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

HOLMES, RALPH E

Provider ID: 206105
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-5999
 Fax: (858) 966-8394
 After Hours Phone: (858) 966-5999
 Provider Gender: Male
 License number: G24863
 NPI: 1104899723
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Sharp Memorial Hospital, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessability: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

KIM, ERINN N
 Provider ID: 283742
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-5999
 Fax: (858) 966-4064
 After Hours Phone: (858) 966-5999
 Provider Gender: Female
 License number: A134797
 NPI: 1558705061
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency: No
 Hospital Affiliation: Rady
 Childrens Hospital San Diego
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

KOLB, FREDERIC J
 Provider ID: 246239
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: F39
 NPI: 1790341832
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

Network, Ucsd Medical Group

KOLB, FREDERIC J
 Provider ID: 246240
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: F39
 NPI: 1790341832
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 French
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 Accessability:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

KOLB, FREDERIC J
 Provider ID: 255575
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: F39 NPI: 1790341832 Provider English Spoken: Yes Provider Language(s) Spoken: French Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: No Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group KOLB, FREDERIC J Provider ID: 255576 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 Phone: (858) 966-5999 Fax: (858) 966-8394 After Hours Phone: (858) 966-5999 Provider Gender: Female License number: F39 NPI: 1790341832 Provider English Spoken: Yes Provider Language(s) Spoken: French Cultural Competency: No Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/18 American Sign Language (ASL):	No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group LANCE, SAMUEL H Provider ID: 109469 Board Certified Specialty: No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 Phone: (858) 966-5999 Fax: (858) 966-8394 After Hours Phone: (858) 966-5999 Provider Gender: Male License number: A114551 NPI: 1780811786 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group LANCE, SAMUEL H Provider ID: 205647 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 Phone: (858) 966-5999 Fax: (858) 966-8394 After Hours Phone: (858) 966-5999 Provider Gender: Male License number: A114551 NPI: 1780811786	Provider ID: 110708 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A114551 NPI: 1780811786 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Rady Childrens Hospital San Diego, Ucd Davis Medical Ctr, Ucsd La Jolla John Sally Thornton Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Rady Childrens Health Network, Ucsd Medical Group
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D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, Uc
 Davis Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

LANCE, SAMUEL H

Provider ID: 256644
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A114551
NPI: 1780811786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego, Uc
 Davis Medical Ctr, Ucsd La Jolla
 John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM

Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

LANCE, SAMUEL H

Provider ID: 256645
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800)
 926-8273
Provider Gender: Male
License number: A114551
NPI: 1780811786
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Uc Davis
 Medical Ctr, Rady Childrens
 Hospital San Diego, Ucsd La
 Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

ORTIZ-POMALES, YAN T

Provider ID: 289178
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289

Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858)
 966-5999
Provider Gender: Male
License number: A155358
NPI: 1346448537
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp
 Coronado Hosp And Healthcare
 Ctr, Naval Medical Ctr Sd Rbe,
 Rady Childrens Hospital San
 Diego, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

POLLACK, LARRY H

Provider ID: 54346
Board Certified Specialty: No
 SAN DIEGO GEN AND
 VASCULAR SURGEONS MED
 GRP INC
 7910 FROST ST STE 250
 SAN DIEGO, CA 92123-2752
Phone: (858) 565-0104
Fax:
After Hours Phone: (858)
 565-0104
Provider Gender: Male
License number: A41696
NPI: 1104998400
Provider English Spoken: Yes
Provider Language(s) Spoken:
 German, Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-TH 9AM-5PM, F 9AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RECHNIC, MARK
Provider ID: 64155
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: G42815
NPI: 1114060126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Sharp Memorial Hospital, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

REID, CHRISTOPHER M
Provider ID: 224795
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

REID, CHRISTOPHER M
Provider ID: 245523
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858) 966-5999
Provider Gender: Male
License number: A122947

NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

REID, CHRISTOPHER M
Provider ID: 255564
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A122947
NPI: 1982964276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

SULIMAN, AHMED S

Provider ID: 289129
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858)
 966-5999
Provider Gender: Male
License number: A88033
NPI: 1013169085
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ronald Reagan UCLA Med
 Ctr, Ucsd La Jolla John Sally
 Thornton, Rady Childrens
 Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
 No

♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network

WONG, RYAN K

Provider ID: 64258
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR

SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
 543-6222
Provider Gender: Male
License number: A106001
NPI: 1912101452
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Southwest
 Healthcare System Murrieta,
 Loma Linda University Med Ctr
 Murrieta, Saddleback Memorial
 Med Ctr, Hoag Memorial Hospital
 Presbyterian, Temecula Valley
 Hospital Inc, Ucsd Medical Ctr,
 Stanford Health Care, Southwest
 Healthcare System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA:

SURGERY THORACIC

ARTRIP, JOHN H

Provider ID: 243973
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858)
 966-8030
Provider Gender: Male
License number: C160728

NPI: 1831141084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
 IPA: Rady Childrens Health
 Network, Ucsd Medical Group

ARTRIP, JOHN H

Provider ID: 260597
Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123-4223
Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858)
 966-8030
Provider Gender: Male
License number: C160728
NPI: 1831141084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
 Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/99
American Sign Language (ASL):
 No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

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D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

COLETTA, JOELLE M

Provider ID: 63860
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Female
License number: A55001
NPI: 1447222377
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Green Hospital, Sharp Memorial
Hospital, Ucsd Medical Ctr, Rady
Childrens Hospital San Diego,
Ucsd La Jolla John Sally
Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

COPELAND, JACK G

Provider ID: 63861
Board Certified Specialty: No
UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222
Fax:
After Hours Phone: (619)
543-6222
Provider Gender: Male
License number: G19547
NPI: 1730152786
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

GANTA, SRUJAN

Provider ID: 275611
Board Certified Specialty: No
UCSD MEDICAL GROUP
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 966-5855
Fax:
After Hours Phone: (858)
966-5855
Provider Gender: Male
License number: A166273
NPI: 1265071005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

MONTESA, CHRISTINE M

Provider ID: 215266
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
3030 CHILDRENS WAY STE
202
SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax:
After Hours Phone: (858)
966-8030
Provider Gender: Female
License number: A110356
NPI: 1467616581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: San Antonio
Comm Hosp, Ucsd La Jolla John
Sally Thornton, Ucsd Medical
Ctr, Rady Childrens Hospital San
Diego, Pomona Valley Hosp Med
Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network, Ucsd Medical Group

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

MONTESA, CHRISTINE M

Provider ID: 239170
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227
Phone: (858) 966-8030
Fax:
After Hours Phone: (858) 966-8030
Provider Gender: Female
License number: A110356
NPI: 1467616581
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: San Antonio Comm Hosp, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego, Pomona Valley Hosp Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

NIGRO, JOHN J

Provider ID: 205367
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 3030 CHILDRENS WAY STE 202
 SAN DIEGO, CA 92123-4227

Phone: (858) 966-8030
Fax: (858) 966-8032
After Hours Phone: (858) 966-8030
Provider Gender: Male
License number: G80887
NPI: 1881707818
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

PRETORIUS, GERT D

Provider ID: 64148
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-7777
Fax:
After Hours Phone: (619) 543-7777
Provider Gender: Male
License number: A113774
NPI: 1629385836
Provider English Spoken: Yes
Provider Language(s) Spoken: Afrikaans
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego, Tri City Medical Ctr, Ucsd Medical Ctr, Ucsd La Jolla John Sally

Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network, Ucsd Medical Group

SAKAKIBARA, NAOHIDE

Provider ID: 64171
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-6222
Fax:
After Hours Phone: (619) 543-6222
Provider Gender: Male
License number: A67153
NPI: 1588697916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SIDERIS, ANTONIOS

Provider ID: 285655
Board Certified Specialty: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

UCSD MEDICAL GROUP
200 W ARBOR DR
SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A173526
NPI: 1134495336
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Greek, Spanish
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

SURGICAL ONCOLOGY

RACE, ALICE J
Provider ID: 271830
Board Certified Specialty: No
UCSD MEDICAL GROUP
4520 EXECUTIVE DR
SAN DIEGO, CA 92121-3018
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A169163
NPI: 1982086922
Provider English Spoken: Yes
Provider Language(s) Spoken:

Mandarin
Cultural Competency: No
Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

TRANSPLANT SURGERY

MEKEEL, KRISTIN L
Provider ID: 262109
Board Certified Specialty: Yes
RADY CHILDRENS HEALTH NETWORK
3020 CHILDRENS WAY # 107
SAN DIEGO, CA 92123-4223
Phone: (858) 966-7711
Fax:
After Hours Phone: (858) 966-7711
Provider Gender: Female
License number: C54096
NPI: 1104861947
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Rady Childrens Health Network

SCHNICKEL, GABRIEL T
Provider ID: 262192
Board Certified Specialty: No
RADY CHILDRENS HEALTH NETWORK
8001 FROST ST
SAN DIEGO, CA 92123-2746
Phone: (858) 966-8354
Fax: (858) 966-5815
After Hours Phone: (858) 966-8354

Provider Gender: Male
License number: A83329
NPI: 1619111440
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
Accessibility: Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

UROLOGY

ALAGIRI, MADHU
Provider ID: 52903
Board Certified Specialty: No
RADY CHILDRENS SPECIALISTS SAN DIEGO MED

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

FNDTN
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax:
 After Hours Phone: (858) 966-7484
 Provider Gender: Male
 License number: G83089
 NPI: 1619083961
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

BECHIS, SETH K
 Provider ID: 110165
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A139139
 NPI: 1376863746
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd Medical Ctr
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

BOSCH, PHILIP C
 Provider ID: 115863
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G46782
 NPI: 1508845983
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

BUCKLEY, JILL C

Provider ID: 83249
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax: (858) 228-1740
 After Hours Phone: (858) 657-8860
 Provider Gender: Female
 License number: A77631
 NPI: 1730198128
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Medical Ctr At Ucsf, Rady Childrens Hospital San Diego
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

CHEN, TONY T
 Provider ID: 283960
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 License number: A171188
 NPI: 1245684497
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>IPA:</i> Rady Childrens Health Network	3444 KEARNY VILLA RD STE 201 SAN DIEGO, CA 92123-1960 <i>Phone:</i> (858) 430-1101 <i>Fax:</i> <i>After Hours Phone:</i> (858) 430-1101 <i>Provider Gender:</i> Male <i>License number:</i> G56844 <i>NPI:</i> 1093756827 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Scripps Memorial Hospital, Ucsd Medical Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-F 8AM-5PM, SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
CHIANG, GEORGE <i>Provider ID:</i> 205945 <i>Board Certified Specialty:</i> No RADY CHILDRENS HEALTH NETWORK 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-7484 <i>Fax:</i> (858) 966-4064 <i>After Hours Phone:</i> (858) 966-7484 <i>Provider Gender:</i> Male <i>License number:</i> A98687 <i>NPI:</i> 1093773954 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	CHIANG, GEORGE <i>Provider ID:</i> 52893 <i>Board Certified Specialty:</i> No RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN 7920 FROST ST STE 200 SAN DIEGO, CA 92123-4289 <i>Phone:</i> (858) 966-7484 <i>Fax:</i> <i>After Hours Phone:</i> (858) 966-7484 <i>Provider Gender:</i> Male <i>License number:</i> A98687 <i>NPI:</i> 1093773954 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Rady Childrens Hospital San Diego, Parkview Community Hospital Medical Center <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> P, EB, IB, E, R, T, W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Rady Childrens Health Network	DATO, PAUL E , MD <i>Provider ID:</i> 269141 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 3444 KEARNY VILLA RD STE 201 SAN DIEGO, CA 92123-1960 <i>Phone:</i> (858) 430-1101 <i>Fax:</i> (858) 430-1106 <i>After Hours Phone:</i> (858) 430-1101 <i>Provider Gender:</i> Male <i>License number:</i> A43540 <i>NPI:</i> 1588632715 <i>Provider English Spoken:</i> Yes
COHEN, EDWARD S <i>Provider ID:</i> 120293 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC	COHEN, EDWARD S <i>Provider ID:</i> 120293 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE PARTNERS PC	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc DICKS, BRIAN M , MD Provider ID: 57668 Board Certified Specialty: No GENESIS HEALTHCARE PARTNERS PC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 Phone: (619) 297-4707 Fax: (858) 429-7927 After Hours Phone: (619) 297-4707 Provider Gender: Male License number: A100413 NPI: 1144425687 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc	PARTNERS PC 4060 4TH AVE STE 310 SAN DIEGO, CA 92103-2120 Phone: (619) 297-4707 Fax: (858) 429-7927 After Hours Phone: (619) 297-4707 Provider Gender: Male License number: A100413 NPI: 1144425687 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA 9AM-5PM Website: Email: Medical Group(s): IPA: Community Care Ipa Llc
DATO, PAUL E Provider ID: 42443 Board Certified Specialty: Yes GENESIS HEALTHCARE PARTNERS PC 3444 KEARNY VILLA RD STE 201 SAN DIEGO, CA 92123-1960 Phone: (858) 430-1101 Fax: After Hours Phone: (858) 430-1101 Provider Gender: Male License number: A43540 NPI: 1588632715 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: No Min/Max Age: None American Sign Language (ASL): No Accessibility: W Hours: M-F 8AM-5PM, SA	DICKS, BRIAN M Provider ID: 57668 Board Certified Specialty: No GENESIS HEALTHCARE	DICKS, BRIAN M Provider ID: 63876 Board Certified Specialty: No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 Phone: (619) 543-6222 Fax: After Hours Phone: (619) 543-6222 Provider Gender: Male License number: A100413 NPI: 1144425687

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital, Ucsd Medical Ctr, Sharp Memorial Hospital, Kaiser Foundation Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GAYLIS, FRANKLIN D , MD

Provider ID: 119549
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 5395 RUFFIN RD STE 202
 SAN DIEGO, CA 92123-1338
Phone: (858) 569-7800
Fax: (858) 429-7930
After Hours Phone: (858) 569-7800
Provider Gender: Male
License number: A46251
NPI: 1750360806
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

GODEBU, ELANA

Provider ID: 127348
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (858) 657-7876
Fax:
After Hours Phone: (858) 657-7876
Provider Gender: Female
License number: A119468
NPI: 1609189224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

GODEBU, ELANA

Provider ID: 203511
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (858) 657-7876
Fax:
After Hours Phone: (858) 657-7876
Provider Gender: Female
License number: A119468
NPI: 1609189224
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

HOLDEN, MARC M

Provider ID: 269620
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A129770
NPI: 1861747396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

HSIEH, TUNG CHIN

Provider ID: 277238
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR
 SAN DIEGO, CA 92121-3018
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A120604
 NPI: 1073758652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HSIEH, TUNG CHIN

Provider ID: 277240
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 11515 EL CAMINO REAL STE
 110
 SAN DIEGO, CA 92130-3034

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 License number: A120604
 NPI: 1073758652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HSIEH, TUNG CHIN

Provider ID: 63967
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
 Phone: (858) 657-8860
 Fax: (858) 228-1740
 After Hours Phone: (858)
 657-8860
 Provider Gender: Male
 License number: A120604
 NPI: 1073758652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla
 John Sally Thornton, Ucsd
 Medical Ctr
 Medi-Cal Open Panel: No
 Min/Max Age: None

American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KANE, CHRISTOPHER J

Provider ID: 63988
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619)
 543-6222
 Provider Gender: Male
 License number: G69249
 NPI: 1083636294
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL):
 No
 ☯ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

KEILLER, DANNY L , MD

Provider ID: 243958
 Board Certified Specialty: Yes
 COMMUNITY CARE IPA LLC
 3444 KEARNY VILLA RD STE
 202

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

SAN DIEGO, CA 92123-1960
 Phone: (619) 299-0670
 Fax: (858) 221-5049
 After Hours Phone: (619) 299-0670
 Provider Gender: Male
 License number: C32092
 NPI: 1346356961
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18/999
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

LAHEY, SUSAN

Provider ID: 128623
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax:
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: C137247
 NPI: 1366578031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

MARIETTI SHEPHERD, SARAH R

Provider ID: 265122
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858) 966-7484
 Provider Gender: Female
 License number: A106447
 NPI: 1801094115
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/18
 American Sign Language (ASL): No
 Accessibility: Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

MONGA, MANOJ

Provider ID: 256847
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G81273
 NPI: 1174609127
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

MONGA, MANOJ

Provider ID: 274480
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: G81273
 NPI: 1174609127
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No

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D. Directorio de proveedores de atención especializada

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

MOSELEY, WILLIAM G

Provider ID: 265104

Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD

3969 4TH AVE STE 202

SAN DIEGO, CA 92103-3165

Phone: (619) 260-0060

Fax: (619) 260-0460

After Hours Phone: (619)

260-0060

Provider Gender: Male

License number: G20196

NPI: 1568564276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Imperial Health Holdings

Medical Group-Sd

PARSONS, LOWELL C

Provider ID: 64129

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (619) 543-6222

Fax:

After Hours Phone: (619)

543-6222

Provider Gender: Male

License number: G33834

NPI: 1588677124

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL): No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA:

PATEL, DEVIN N

Provider ID: 246094

Board Certified Specialty: No
UCSD MEDICAL GROUP

200 W ARBOR DR

SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273

Fax:

After Hours Phone: (800)

926-8273

Provider Gender: Male

License number: A144629

NPI: 1437505559

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Cedars Sinai Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ucsd Medical Group

PE, MARK- RALLY L , MD

Provider ID: 55252

Board Certified Specialty: No
GENESIS HEALTHCARE
PARTNERS PC

4060 4TH AVE STE 310

SAN DIEGO, CA 92103-2120

Phone: (619) 297-4707

Fax: (858) 429-7927

After Hours Phone: (619)

297-4707

Provider Gender: Male

License number: A112013

NPI: 1801003694

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: No

Hospital Affiliation: Sharp
Memorial Hospital, Scripps
Mercy Hospital Chula Vista,
Scripps Mercy Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL): No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PE, MARK- RALLY L

Provider ID: 55252
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax:
After Hours Phone: (619) 297-4707
Provider Gender: Male
License number: A112013
NPI: 1801003694
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REDDY, MADHUMITHA C

Provider ID: 117539
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911

Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: 20A15373
NPI: 1568724417
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Spanish, Telugu
Cultural Competency: No
Hospital Affiliation: Loma Linda University Med Ctr Murrieta, Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

ROBERTS, JAMES L

Provider ID: 113321
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 3444 KEARNY VILLA RD STE 202
 SAN DIEGO, CA 92123-1960
Phone: (619) 299-0670
Fax:
After Hours Phone: (619) 299-0670
Provider Gender: Male
License number: G59945
NPI: 1508972191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ♿ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc

ROBERTS, JAMES L , MD

Provider ID: 270010
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3444 KEARNY VILLA RD STE 201
 SAN DIEGO, CA 92123-1960
Phone: (858) 430-1101
Fax: (858) 221-5049
After Hours Phone: (858) 430-1101
Provider Gender: Male
License number: G59945
NPI: 1508972191
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ♿ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

<i>Email:</i> <i>Medical Group(s):</i> IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc	SAN DIEGO, CA 92103-3165 <i>Phone:</i> (619) 260-0060 <i>Fax:</i> (619) 260-0460 <i>After Hours Phone:</i> (619) 260-0060 <i>Provider Gender:</i> Female <i>License number:</i> A45939 <i>NPI:</i> 1386746097 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Sharp Chula Vista Med Ctr, Sharp Memorial Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Imperial Health Holdings Medical Group-Sd	Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Ucsd Medical Group
ROBERTS, JAMES L , MD <i>Provider ID:</i> 65495 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 4033 3RD AVE STE 400 SAN DIEGO, CA 92103-2140 <i>Phone:</i> (619) 299-0670 <i>Fax:</i> (858) 429-7929 <i>After Hours Phone:</i> (619) 299-0670 <i>Provider Gender:</i> Male <i>License number:</i> G59945 <i>NPI:</i> 1508972191 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Sharp Coronado Hosp And Healthcare Ctr, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA: Blue Shield Promise Health Plan Direct, Community Care Ipa Llc	SAIDIAN, AVA <i>Provider ID:</i> 284831 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (800) 926-8273 <i>Fax:</i> (888) 539-8781 <i>After Hours Phone:</i> (800) 926-8273 <i>Provider Gender:</i> Female <i>License number:</i> A172741 <i>NPI:</i> 1205281912 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Ucsd La Jolla John Sally Thornton, Ucsd	SAKAMOTO, KYOKO <i>Provider ID:</i> 64172 <i>Board Certified Specialty:</i> No UCSD MEDICAL GROUP 200 W ARBOR DR SAN DIEGO, CA 92103-1911 <i>Phone:</i> (619) 543-6222 <i>Fax:</i> <i>After Hours Phone:</i> (619) 543-6222 <i>Provider Gender:</i> Female <i>License number:</i> A80808 <i>NPI:</i> 1740223619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Japanese <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> <i>Medi-Cal Open Panel:</i> No <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> W <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> IPA:
ROCHESTER, MARIANNE G <i>Provider ID:</i> 265134 <i>Board Certified Specialty:</i> No IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD 3969 4TH AVE STE 202		SALEM, CAROL E , MD <i>Provider ID:</i> 56016 <i>Board Certified Specialty:</i> No GENESIS HEALTHCARE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

PARTNERS PC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: G75788
NPI: 1336152982
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SALEM, CAROL E
Provider ID: 56016
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (619) 297-2448
After Hours Phone: (619) 297-4707
Provider Gender: Female
License number: G75788
NPI: 1336152982
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-F 8AM-5PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SALMASI, AMIRALI
Provider ID: 203122
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax:
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A135118
NPI: 1609187962
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi

Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc, Ucsd Medical Group

SANTIAGO-LASTRA, YAHIR A
Provider ID: 110337
Board Certified Specialty: No
UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 111
 SAN DIEGO, CA 92121-3019
Phone: (858) 657-7876
Fax:
After Hours Phone: (858) 657-7876
Provider Gender: Female
License number: A143504
NPI: 1699936609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SEVILLA, CLAUDIA
Provider ID: 283158
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3444 KEARNY VILLA RD STE 202
 SAN DIEGO, CA 92123-1960
Phone: (858) 429-7646
Fax: (858) 429-7929
After Hours Phone: (858) 429-7646
Provider Gender: Female
License number: A131270

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D. Directorio de proveedores de atención especializada

NPI: 1689081275
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Sharp Chula Vista Med Ctr, Alvarado Hospital Llc, Grossmont Hospital, Paradise Valley Hospital, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/105
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SPARKS, STEPHEN S

Provider ID: 119391
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: A103568
 NPI: 1962609925
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Hollywood Presbyterian Med Ctr, Childrens Hosp Of Los Angeles, Childrens Hospital National Medical Center, Fairfax Hospital, Medstar Georgetown Medical Center Inc
 Medi-Cal Open Panel: No

Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SUR, ROGER L

Provider ID: 64214
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 Fax:
 After Hours Phone: (619) 543-6222
 Provider Gender: Male
 License number: G80585
 NPI: 1932208022

Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA:

SWORDS, KELLY

Provider ID: 101215
 Board Certified Specialty: No
 RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN
 7920 FROST ST STE 200

SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax:
 After Hours Phone: (858) 966-7484
 Provider Gender: Female
 License number: A136481
 NPI: 1316101256
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation: Rady Childrens Hospital San Diego, Childrens Hosp And Resrch Ctr At Oakland
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: Accessibility: P, EB, IB, E, R, T, W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health Network

SWORDS, KELLY

Provider ID: 206183
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 7920 FROST ST STE 200
 SAN DIEGO, CA 92123-4289
 Phone: (858) 966-7484
 Fax: (858) 966-4064
 After Hours Phone: (858) 966-7484
 Provider Gender: Female
 License number: A136481
 NPI: 1316101256
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Hospital Affiliation: Rady
 Childrens Hospital San Diego,
 Childrens Hosp And Resrch Ctr
 At Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
 Network

ULOKO, MARIA I

Provider ID: 284961
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 16950 VIA TAZON
 SAN DIEGO, CA 92127-1607
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

ULOKO, MARIA I

Provider ID: 284962
Board Certified Specialty: No
 UCSD MEDICAL GROUP
 4520 EXECUTIVE DR STE 360
 SAN DIEGO, CA 92121-3020
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
 926-8273
Provider Gender: Female
License number: A166093
NPI: 1326426016
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

UNTERBERG, STEPHEN H

Provider ID: 284664
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 4060 4TH AVE STE 310
 SAN DIEGO, CA 92103-2120
Phone: (619) 297-4707
Fax: (858) 429-7933
After Hours Phone: (619)
 297-4707
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

UNTERBERG, STEPHEN H

Provider ID: 284665
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 11770 BERNARDO PLAZA CT
 STE 270
 SAN DIEGO, CA 92128-2425
Phone: (858) 485-0554
Fax: (858) 429-7993
After Hours Phone: (858)
 485-0554
Provider Gender: Male
License number: A133758
NPI: 1215374210
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 16/110
American Sign Language (ASL):
 No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

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D. Directorio de proveedores de atención especializada

VAPNEK, EVAN M

Provider ID: 114201
Board Certified Specialty: No
GENESIS HEALTHCARE PARTNERS PC
 3444 KEARNY VILLA RD STE 202
 SAN DIEGO, CA 92123-1960
Phone: (858) 429-7646
Fax:
After Hours Phone: (858) 429-7646
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VAPNEK, EVAN M , MD

Provider ID: 270006
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 3444 KEARNY VILLA RD STE 201
 SAN DIEGO, CA 92123-1960

Phone: (858) 430-1101
Fax: (858) 221-5049
After Hours Phone: (858) 430-1101
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VAPNEK, EVAN M , MD

Provider ID: 65497
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 4033 3RD AVE STE 400
 SAN DIEGO, CA 92103-2140
Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670
Provider Gender: Male
License number: G75357
NPI: 1811003411
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Sharp Coronado

Hosp And Healthcare Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

WITTHAUS, MICHAEL W

Provider ID: 285494
Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A174216
NPI: 1871987180
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Ucsd Medical Group

WOO, JASON R

Provider ID: 98954

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
UCSD MEDICAL GROUP
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
Phone: (619) 543-3572
Fax: (619) 543-3475
After Hours Phone: (619) 543-3572
Provider Gender: Male
License number: A114634
NPI: 1437380086
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

SAN MARCOS

CARDIOLOGY

MOHAMEDALI, BURHAN, MD
Provider ID: 245578
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760) 798-8855
Provider Gender: Male
License number: A125669
NPI: 1831393289

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Swahili
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOUSSAVIAN, MEHRAN, MD
Provider ID: 242265
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (760) 755-5245
After Hours Phone: (760) 798-8855
Provider Gender: Male
License number: 20A7241
NPI: 1689788234

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr, Tri City Medical Ctr, Sharp Memorial Hospital, Alvarado Hospital Llc, Grossmont Hospital, Scripps Mercy Hospital, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
 ☞ *Accessibility:*

Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

NARAYANAN, MEENA R , MD
Provider ID: 247696
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 955 BOARDWALK STE 100
 SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760) 798-8855
Provider Gender: Female
License number: A113448
NPI: 1508170697

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: No
Min/Max Age: 18/999
American Sign Language (ASL): No
 ☞ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED BEHAVIORAL ANALYST MASTERS

BARMAKIAN, HEATHER
Provider ID: 116921
Board Certified Specialty: No
CENTER FOR AUTISM AND RELATED DISORDER

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

334 VIA VERA CRUZ STE 107
SAN MARCOS, CA 92078-2637
Phone: (760) 304-5010
Fax: (818) 449-0994
After Hours Phone: (760) 304-5010
Provider Gender: Female
License number: BCBA3668
NPI: 1891950861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

LOCKE, BREANNA

Provider ID: 123282
Board Certified Specialty: No
CENTER FOR AUTISM AND
RELATED DISORDER
334 VIA VERA CRUZ STE 107
SAN MARCOS, CA 92078-2637
Phone: (760) 304-5010
Fax: (760) 539-9849
After Hours Phone: (760) 304-5010
Provider Gender: Female
License number: BCBA17469
NPI: 1861887416
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA:

CERTIFIED NURSE PRACTITIONER

ANDREW, SHIRLEY A

Provider ID: 288497
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 748-8935
Fax: (760) 466-0078
After Hours Phone: (760) 748-8935
Provider Gender: Female
License number: NP95017459
NPI: 1528731403
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

BUCKLEY, PATRICIA J

Provider ID: 280382
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599

Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: NP95015705
NPI: 1700470200
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

COYLE, JENNIFER M

Provider ID: 122758
Board Certified Specialty: No
CALIFORNIA CANCER
ASSOCS FOR RESEARCH AND
EXCELL
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax:
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: NP95006591
NPI: 1538689310
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
 ☞ Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

COYLE, JENNIFER M , NPA

Provider ID: 253094
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
 Phone: (760) 748-8935
 Fax: (760) 466-0078
 After Hours Phone: (760)
 748-8935
 Provider Gender: Female
 License number: NP95006591
 NPI: 1538689310
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

FAIQ, JAMILA, NPA

Provider ID: 254825
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599

Phone: (760) 474-8935
 Fax:
 After Hours Phone: (760)
 474-8935
 Provider Gender: Female
 License number: NP95004759
 NPI: 1518414366
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16/120
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FAIQ, JAMILA

Provider ID: 262384
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS
 MEDICAL GROUP-SD
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
 Phone: (760) 474-8935
 Fax:
 After Hours Phone: (760)
 474-8935
 Provider Gender: Female
 License number: NP95004759
 NPI: 1518414366
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FRANZ, CORTNEY D , NPA

Provider ID: 257616
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
 Phone: (760) 474-8935
 Fax: (760) 466-0078
 After Hours Phone: (760)
 474-8935
 Provider Gender: Female
 License number: NP95004258
 NPI: 1174077507
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Memorial Hospital Encinitas
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☞ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc,
 Imperial Health Holdings Medical
 Group-Sd

FRANZ, CORTNEY D

Provider ID: 262399
 Board Certified Specialty: No

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D. Directorio de proveedores de atención especializada

IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax: (760) 466-0078
After Hours Phone: (760)
474-8935
Provider Gender: Female
License number: NP95004258
NPI: 1174077507
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

KROCHMAL, RACHEL E

Provider ID: 288905
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078-4236
Phone: (760) 740-2710
Fax: (858) 207-0003
After Hours Phone: (760)
740-2710
Provider Gender: Female
License number: NP457272
NPI: 1326117920
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Palomar Medical
Center
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

MANCHESTER, KAREN L

Provider ID: 288906
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078-4236
Phone: (760) 740-2710
Fax: (858) 207-0003
After Hours Phone: (760)
740-2710
Provider Gender: Female
License number: NP20883
NPI: 1801225941
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health

Network

MOGA, CLAIRE S

Provider ID: 262368
Board Certified Specialty: No
IMPERIAL HEALTH HOLDINGS
MEDICAL GROUP-SD
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95007255
NPI: 1144748211
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Imperial Health Holdings
Medical Group-Sd

MWAURA, WAIRIMU R , NPA

Provider ID: 269681
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax:
After Hours Phone: (760)
747-8935
Provider Gender: Female
License number: NP95009639
NPI: 1598320996

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PALEN, BARBARA A

Provider ID: 257459
Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 150 VALPREDA RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: NP3108
NPI: 1265447601
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

RORABAUGH, EMILY N

Provider ID: 263140
Board Certified Specialty: No
 RADY CHILDRENS HEALTH NETWORK
 1582 W SAN MARCOS BLVD
 STE 203
 SAN MARCOS, CA 92078-4081
Phone: (760) 744-6710
Fax: (760) 744-6156
After Hours Phone: (760) 744-6710
Provider Gender: Female
License number: NP95004705
NPI: 1619424959
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health Network

CHIROPRACTOR

MAUSER, JILL ELLEN A

Provider ID: 270661
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1146 SAN MARINO DR
 SAN MARCOS, CA 92078-4649
Phone: (760) 471-2033
Fax: (760) 471-2083
After Hours Phone: (760) 471-2033
Provider Gender: Female

License number: DC17617
NPI: 1033274311
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DERMATOLOGY

KIM, JESSICA Y

Provider ID: 247631
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 250
 SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax:
After Hours Phone: (760) 738-7600
Provider Gender: Female
License number: 20A17031
NPI: 1245663228
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P , MD

Provider ID: 269347
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax: (760) 828-9141
After Hours Phone: (760)
738-7600

Provider Gender: Male
License number: A125103
NPI: 1952436354

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P

Provider ID: 72869
Board Certified Specialty: No
DERMATOLOGY SPECIALISTS
INC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax:
After Hours Phone: (760)
738-7600
Provider Gender: Male
License number: A125103
NPI: 1952436354

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 51773
Board Certified Specialty: No
NORTH COUNTY HEALTH
SERVICES SAN MARCOS
150 VALPREDA RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Male
License number: C54157
NPI: 1275630618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Bengali
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:

Medical Group(s): Truecare
IPA:

NATH, DEVARSHI

Provider ID: 51773
Board Certified Specialty: No
IHP N COUNTY HEALTH SAN
MARCOS HEALTH CT
150 VALPREDA RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Male
License number: C54157
NPI: 1275630618

Provider English Spoken: Yes
Provider Language(s) Spoken:
Bengali
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA:

WALKER, SHAYNA T

Provider ID: 75271
Board Certified Specialty: No
NORTH COUNTY HEALTH
SERVICES SAN MARCOS
150 VALPREDA RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihsocal.org
Email:
Medical Group(s): Truecare
IPA:

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO
Provider ID: 125411
Board Certified Specialty: No
 CALIFORNIA CANCER ASSOCS FOR RESEARCH AND EXCELL
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 452-3340
Fax:
After Hours Phone: (760) 452-3340
Provider Gender: Male
License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Pomerado

Hospital, Palomar Medical Center
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

BESSUDO, ALBERTO, MD
Provider ID: 256963
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: A50309
NPI: 1003888074
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Pomerado Hospital, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

EISENBERG, STEVEN G
Provider ID: 242456
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: 20A8293
NPI: 1831162627
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KOSMO, MICHAEL A , MD
Provider ID: 241034
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935

Provider Gender: Male
License number: G54074
NPI: 1891742847
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/120
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

LAMON, JOEL M , MD

Provider ID: 241037
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G28164
NPI: 1699721035
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog

Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SULLIVAN, JESSICA E , MD

Provider ID: 269662
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: 20A16273
NPI: 1942407150
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital Encinitas, Temecula Valley Hospital Inc, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HOSPICE AND PALLIATIVE MEDICINE

PASHA, SABIHA

Provider ID: 276669
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 466-0078
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: C50413
NPI: 1871529461
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish, Urdu
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Mercy Medical Center Redding, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

INTERNAL MEDICINE

JEFFERIS, LAUREN R

Provider ID: 34915
Board Certified Specialty: No
NORTH COUNTY HEALTH

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D. Directorio de proveedores de atención especializada

SERVICES SAN MARCOS
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767

Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Female
License number: A80674
NPI: 1346354776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihsocal.org
Email:
Medical Group(s): Truecare
IPA:

MCCLAY, EDWARD F , MD
Provider ID: 243932
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760)
747-8935
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Scripps Memorial
Hospital Encinitas, Palomar

Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Imperial Health Holdings Medical
Group-Sd

WITCZAK, IZABELA
Provider ID: 24822
Board Certified Specialty: No
NORTH COUNTY HEALTH
SERVICES SAN MARCOS
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Provider Gender: Female
License number: A71311
NPI: 1184735201
Provider English Spoken: Yes
Provider Language(s) Spoken:
Polish
Cultural Competency: No
Hospital Affiliation: Scripps
Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
Accessibility: P, EB, IB, E, R,
T, W
Hours: M-SA 8AM-5PM
Website: www.ihsocal.org
Email:
Medical Group(s): Truecare
IPA:

INTERVENTIONAL CARDIOLOGY

CARLSON, STEVEN K , MD
Provider ID: 244811
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax: (760) 755-5245
After Hours Phone: (760)
798-8855
Provider Gender: Male
License number: A109957
NPI: 1467602946
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Garfield
Medical Center, Santa Monica
Ucla Med Ctr, Ronald Reagan
Ucla Med Ctr, Scripps Mercy
Hospital, Sharp Chula Vista Med
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOUSSAVIAN, MEHRAN
Provider ID: 121818
Board Certified Specialty: No
CARDIOVASCULAR INSTITUTE
OF SAN DIEGO

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D. Directorio de proveedores de atención especializada

955 BOARDWALK STE 100
SAN MARCOS, CA 92078-2659
Phone: (760) 798-8855
Fax:
After Hours Phone: (760)
798-8855
Provider Gender: Male
License number: 20A7241
NPI: 1689788234
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Chula
Vista Med Ctr, Tri City Medical
Ctr, Sharp Memorial Hospital,
Alvarado Hospital Llc, Grossmont
Hospital, Scripps Mercy Hospital,
Scripps Memorial Hospital
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA
Provider ID: 288899
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078-4236
Phone: (760) 740-2710
Fax: (858) 207-0003
After Hours Phone: (760)
740-2710
Provider Gender: Female
License number: A121142

NPI: 1396066635
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Russian, Spanish
Cultural Competency: No
Hospital Affiliation: Pioneers
Memorial Hospital, El Centro
Regional Medical Center,
Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

CIZMAR, BRANISLAV
Provider ID: 288927
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078-4236
Phone: (760) 740-2710
Fax: (858) 207-0003
After Hours Phone: (760)
740-2710
Provider Gender: Male
License number: A80606
NPI: 1679554372
Provider English Spoken: Yes
Provider Language(s) Spoken:
Italian, Slovak, Spanish
Cultural Competency: No
Hospital Affiliation: Pomerado
Hospital, Tri City Medical Ctr,
Palomar Medical Center, Rady
Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18

American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Rady Childrens Health
Network

HINSHAW, PAUL W
Provider ID: 288907
Board Certified Specialty: No
RADY CHILDRENS HEALTH
NETWORK
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078-4236
Phone: (760) 740-2710
Fax: (858) 207-0003
After Hours Phone: (760)
740-2710
Provider Gender: Male
License number: 20A13379
NPI: 1215170717
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Palomar
Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc,
Rady Childrens Health Network

MAZAREI, RAHELE
Provider ID: 67755
Board Certified Specialty: No
NORTH COUNTY HEALTH

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D. Directorio de proveedores de atención especializada

SERVICES SAN MARCOS
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 758-7057
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: 20A7358
NPI: 1639170459
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA:

MAZAREI, RAHELE
Provider ID: 67755
Board Certified Specialty: No
IHP N COUNTY HEALTH SAN MARCOS HEALTH CT
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 758-7057
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: 20A7358
NPI: 1639170459
Provider English Spoken: Yes
Provider Language(s) Spoken:

Farsi, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA:

POUNTNEY, MARLENE E
Provider ID: 257452
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
License number: A93248
NPI: 1174703680
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

POUNTNEY, MARLENE E
Provider ID: 78200
Board Certified Specialty: No
NORTH COUNTY HEALTH SERVICES SAN MARCOS
150 VALPRED RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760) 736-6700
Provider Gender: Female
License number: A93248
NPI: 1174703680
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA: Blue Shield Promise Health Plan Direct

SCHWEIKERT, SUZANNE M
Provider ID: 77220
Board Certified Specialty: No
IHP N COUNTY HEALTH SAN MARCOS HEALTH CT
150 VALPRED RD
SAN MARCOS, CA 92069-2973

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D. Directorio de proveedores de atención especializada

Phone: (760) 736-6700
Fax:
After Hours Phone: (760) 736-6700
Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA:

SCHWEIKERT, SUZANNE M
Provider ID: 77220
Board Certified Specialty: No
 NORTH COUNTY HEALTH SERVICES SAN MARCOS
 150 VALPREDIA RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax:
After Hours Phone: (760) 736-6700
Provider Gender: Female
License number: A60958
NPI: 1477560142
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No

Hospital Affiliation: Sharp Memorial Hospital, Tri City Medical Ctr, Sharp Mary Birch Hosp For Women And Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, R, T, W
Hours: M-SA 8AM-5PM
Website: www.ihpsocal.org
Email:
Medical Group(s): Truecare
IPA:

ONCOLOGY MEDICAL

EISENBERG, STEVEN G
Provider ID: 54040
Board Certified Specialty: No
 CA CANCER ASSOC FOR RES & EXCEL-ESCONDID
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: 20A8293
NPI: 1831162627
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

FRAKES, LAURIE A , MD
Provider ID: 269134
Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 838 NORDAHL RD STE 300
 SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (559) 473-2180
After Hours Phone: (760) 747-8935
Provider Gender: Female
License number: A52663
NPI: 1174595144
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

KOSMO, MICHAEL A
Provider ID: 70373
Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G54074
NPI: 1891742847
Provider English Spoken: Yes
Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Medical Center, Pomerado Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

MCCLAY, EDWARD F

Provider ID: 54085
Board Certified Specialty: No
CA CANCER ASSOC FOR RES & EXCEL-ESCONDID
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 747-8935
Fax: (760) 747-7951
After Hours Phone: (760) 747-8935
Provider Gender: Male
License number: G64594
NPI: 1497727465
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 16/120
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

SINCLAIR, JAMES M , MD

Provider ID: 257003
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069-3599
Phone: (760) 474-8935
Fax:
After Hours Phone: (760) 474-8935
Provider Gender: Male
License number: G48926
NPI: 1356300230
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: Hours: M-SA 9AM-5PM
Website:

Email:
Medical Group(s):
IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

OPHTHALMOLOGY

PRESTERA, TORY, MD

Provider ID: 204707
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069-1294
Phone: (760) 598-0400
Fax: (760) 290-7044
After Hours Phone: (760) 598-0400
Provider Gender: Male
License number: A62321
NPI: 1346224557
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: No
Hospital Affiliation: Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
Accessibility: W
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

PEDIATRICS

POSADAS, EMERITO D

Provider ID: 257536
Board Certified Specialty: No
BLUE SHIELD PROMISE

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D. Directorio de proveedores de atención especializada

HEALTH PLAN DIRECT
150 VALPREDA RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Male
License number: A48980
NPI: 1720093198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No
Hospital Affiliation: Palomar Health Downtown Campus, Tri City Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL): No
♿ Accessibility: P, EB, IB, E, R, T
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

PHYSICIANS ASSISTANT

SERING, MALIA A , NPA
Provider ID: 269280
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069-3596
Phone: (760) 738-7600
Fax: (760) 828-9141
After Hours Phone: (760) 738-7600
Provider Gender: Female
License number: PA19459
NPI: 1013198720

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

DUONG, ANDREW Q
Provider ID: 269953
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760) 839-2905
Provider Gender: Male
License number: PT40674
NPI: 1154745404
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):

IPA: Community Care Ipa Llc
JIMENEZ, MONICA C
Provider ID: 108896
Board Certified Specialty: No
SAN DIEGO SPINE AND SPORT INC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax:
After Hours Phone: (760) 839-2905
Provider Gender: Female
License number: PT33505
NPI: 1952446650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: W
Hours: M-F 7AM-6PM, SA 7AM-2PM
Website:
www.spineandsport.com
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

JIMENEZ, MONICA C
Provider ID: 269773
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760) 839-2905
Provider Gender: Female
License number: PT33505

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D. Directorio de proveedores de atención especializada

NPI: 1952446650

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

KURTZ, BENJAMIN W

Provider ID: 270332

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

277 RANCHEROS DR STE 150

SAN MARCOS, CA 92069-2976

Phone: (951) 696-9353

Fax:

After Hours Phone: (951)

696-9353

Provider Gender: Male

License number: PT291545

NPI: 1437555489

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

LANE, JENNIFER A

Provider ID: 270663

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2115 MONTIEL RD # 200

SAN MARCOS, CA 92069-3587

Phone: (760) 839-2905

Fax: (760) 839-2901

After Hours Phone: (760)

839-2905

Provider Gender: Female

License number: PT37920

NPI: 1477849537

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

MALLINSON, DARREN

Provider ID: 271147

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2115 MONTIEL RD STE 103

SAN MARCOS, CA 92069-3587

Phone: (760) 839-2905

Fax:

After Hours Phone: (760)

839-2905

Provider Gender: Male

License number: PT28994

NPI: 1871607283

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHANNON, MICHAEL J

Provider ID: 269581

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

2115 MONTIEL RD STE 103

SAN MARCOS, CA 92069-3587

Phone: (760) 839-2905

Fax: (760) 839-2901

After Hours Phone: (760)

839-2905

Provider Gender: Male

License number: PT27069

NPI: 1952577983

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

SHAO, PAULA J

Provider ID: 269785

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760) 839-2905
Provider Gender: Female
License number: PT19297
NPI: 1457649287
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Community Care Ipa Llc

YAP, AMANDA E

Provider ID: 270649
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069-3587
Phone: (760) 839-2905
Fax: (760) 839-2901
After Hours Phone: (760) 839-2905
Provider Gender: Female
License number: PT292801
NPI: 1992224141
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese, Vietnamese
Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):

No
♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY NEUROLOGICAL

NGUYEN, ANDREW D

Provider ID: 244136
Board Certified Specialty: No
UCSD MEDICAL GROUP
277 RANCHEROS DR STE 100
SAN MARCOS, CA 92069-2959
Phone: (800) 926-8273
Fax: After Hours Phone: (800) 926-8273
Provider Gender: Male
License number: A91563
NPI: 1720216542
Provider English Spoken: Yes
Provider Language(s) Spoken: French, Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation: Ucsd Medical Ctr, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No

♿ Accessibility: Hours: M-SA 9AM-5PM
Website: Email: Medical Group(s):
IPA: Ucsd Medical Group

SAN YSIDRO

FAMILY PRACTICE

TALAVERA, GREGORY A

Provider ID: 24808
Board Certified Specialty: No
SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: After Hours Phone: (619) 662-4100
Provider Gender: Male
License number: A40061
NPI: 1740337161
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
♿ Accessibility: Hours: M-F 8AM-5:30PM, SA 8:30AM-2PM
Website: www.ihpsocal.org
Email: Medical Group(s): San Ysidro Health San Ysidro Health Center
IPA:

OBSTETRICS / GYNECOLOGY

DOLINSKY, BRAD M

Provider ID: 287240
Board Certified Specialty: No
IHP-SAN YSIDRO HEALTH CENTER
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Provider Gender: Male
License number: C149818

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D. Directorio de proveedores de atención especializada

NPI: 1942480199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation: Scripps

Green Hospital, Scripps Mercy

Hospital, Scripps Memorial

Hospital, Scripps Memorial

Hospital Encinitas, Scripps Mercy

Hospital Chula Vista

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Ihp-San Ysidro Health

Center

PEDIATRICS

BARBADILLO, FERDINAND F

Provider ID: 24669

Board Certified Specialty: No

SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Provider Gender: Male

License number: A49307

NPI: 1982662193

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hospital Affiliation: Paradise

Valley Hospital, Sharp Chula

Vista Med Ctr

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-F 8AM-5:30PM, SA

8:30AM-2PM

Website: www.ihpsocal.org

Email:

Medical Group(s): San Ysidro

Health San Ysidro Health Center

IPA:

HERMAN, ANDREA M

Provider ID: 257603

Board Certified Specialty: No

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

4050 BEYER BLVD

SAN YSIDRO, CA 92173-2007

Phone: (619) 662-4100

Fax: (619) 205-1967

After Hours Phone: (619)

662-4100

Provider Gender: Female

License number: A72721

NPI: 1518970037

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation: Scripps Mercy

Hospital Chula Vista, Sharp

Chula Vista Med Ctr, Scripps

Memorial Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health

Plan Direct

SANTEE

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 69230

Board Certified Specialty: No

SUMANA AND ANANTHRAM

REDDY MD INC

9456 CUYAMACA ST STE 102

SANTEE, CA 92071-5919

Phone: (619) 588-4074

Fax:

After Hours Phone: (619)

588-4074

Provider Gender: Female

License number: C52581

NPI: 1053300251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish,

Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: No

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility: W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

REDDY, SUMANA, MD

Provider ID: 69230

Board Certified Specialty: No

SUMANA AND ANANTHRAM

REDDY MD INC

9456 CUYAMACA ST STE 102

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D. Directorio de proveedores de atención especializada

SANTEE, CA 92071-5919

Phone: (619) 377-6565

Fax: (619) 451-2111

After Hours Phone: (619)

377-6565

Provider Gender: Female

License number: C52581

NPI: 1053300251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish,

Telugu

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

CERTIFIED NURSE PRACTITIONER

GRIMM, HANA R

Provider ID: 261036

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

9600 CUYAMACA ST STE 101

SANTEE, CA 92071-2692

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619)

749-2150

Provider Gender: Female

License number: NP22474

NPI: 1831463751

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

MACCHIARELLA, TAWNYA L

Provider ID: 261946

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

9600 CUYAMACA ST STE 101

SANTEE, CA 92071-2692

Phone: (619) 749-2150

Fax:

After Hours Phone: (619)

749-2150

Provider Gender: Female

License number: NP7154

NPI: 1194905489

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: No

Min/Max Age: 0/18

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Rady Childrens Health

Network

GASTROENTEROLOGY

REDDY, ANANTHRAM P

Provider ID: 69412

Board Certified Specialty: No

SUMANA AND ANANTHRAM

REDDY MD INC

9456 CUYAMACA ST STE 102

SANTEE, CA 92071-5919

Phone: (619) 588-4074

Fax: (619) 588-4004

After Hours Phone: (619)

588-4074

Provider Gender: Male

License number: C52423

NPI: 1124014923

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cambodian, Hindi, Spanish

Cultural Competency: No

Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

No

Accessibility:

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc,

Imperial Health Holdings Medical

Group-Sd

REDDY, ANANTHRAM P , MD

Provider ID: 69412

Board Certified Specialty: No

SUMANA AND ANANTHRAM

REDDY MD INC

9456 CUYAMACA ST STE 102

SANTEE, CA 92071-5919

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D. Directorio de proveedores de atención especializada

Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619) 588-4074
 Provider Gender: Male
 License number: C52423
 NPI: 1124014923
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, ANANTHRAM P

Provider ID: 69412
 Board Certified Specialty: No
 SUMANA AND ANANTHRAM REDDY MD INC
 9456 CUYAMACA ST STE 102
 SANTEE, CA 92071-5919
 Phone: (619) 588-4074
 Fax: (619) 326-0380
 After Hours Phone: (619) 588-4074
 Provider Gender: Male
 License number: C52423
 NPI: 1124014923
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cambodian, Hindi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Grossmont

Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: No
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc, Imperial Health Holdings Medical Group-Sd

REDDY, JOSEPH B

Provider ID: 69226
 Board Certified Specialty: No
 IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD
 9456 CUYAMACA ST STE 102
 SANTEE, CA 92071-5919
 Phone: (619) 588-4074
 Fax: (619) 588-4004
 After Hours Phone: (619) 588-4074
 Provider Gender: Male
 License number: A46472
 NPI: 1245215391
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Spanish, Telugu
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital, Alvarado Hospital Llc
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility: W
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Imperial Health Holdings Medical Group-Sd

PHYSICIANS ASSISTANT

COOL, JAY M , NPA

Provider ID: 241374
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
 Phone: (619) 662-4100
 Fax: (619) 873-3746
 After Hours Phone: (619) 662-4100
 Provider Gender: Male
 License number: PA53135
 NPI: 1407887227
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MERCER, KELLY C

Provider ID: 257507
 Board Certified Specialty: No
 BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 10538 MISSION GORGE RD
 STE 100
 SANTEE, CA 92071-3154
 Phone: (619) 456-0033
 Fax:
 After Hours Phone: (619) 456-0033
 Provider Gender: Female
 License number: PA21625

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D. Directorio de proveedores de atención especializada

NPI: 1154609790
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: None
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Blue Shield Promise Health Plan Direct

RADIOLOGY DIAGNOSTIC X-RAY

NAUMANN, MICHAEL T , MD
 Provider ID: 269663
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 258-8552
 Fax: (619) 258-8553
 After Hours Phone: (619) 258-8552
 Provider Gender: Female
 License number: A116596
 NPI: 1386821171
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:

Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

RADIOLOGY

JACOBSEN, JAMES C , MD
 Provider ID: 243976
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 460-2770
 Fax: (619) 460-2274
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 License number: A87878
 NPI: 1356394811
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MOORE, BRIAN S , MD
 Provider ID: 243961
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854

Phone: (619) 460-2770
 Fax:
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 License number: G68336
 NPI: 1831144005
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

VENKATESH, VIJAY B , MD
 Provider ID: 269661
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9640 MISSION GORGE RD STE H
 SANTEE, CA 92071-3854
 Phone: (619) 460-2770
 Fax: (619) 460-2774
 After Hours Phone: (619) 460-2770
 Provider Gender: Male
 License number: A94476
 NPI: 1689627085
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Grossmont Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID C

Provider ID: 248308
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071-4375
 Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (760)
 591-7750
 Provider Gender: Male
 License number: PT12422
 NPI: 1063461101
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DAHER, NICOLE M

Provider ID: 270343
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071-4375

Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (619)
 448-4860
 Provider Gender: Female
 License number: PT42881
 NPI: 1790155844
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

DANSEY, ASHLEY R

Provider ID: 270339
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 9830 PROSPECT AVE STE A
 SANTEE, CA 92071-4375
 Phone: (619) 448-4860
 Fax: (619) 448-1639
 After Hours Phone: (619)
 448-4860
 Provider Gender: Female
 License number: PT36952
 NPI: 1962716076
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM

Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

GRIEGER, NANCY N

Provider ID: 270118
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8790 CUYAMACA ST STE A
 SANTEE, CA 92071-4295
 Phone: (619) 596-5969
 Fax: (619) 596-5970
 After Hours Phone: (619)
 596-5969
 Provider Gender: Female
 License number: PT40167
 NPI: 1003956798
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

MILLER, LAURA C

Provider ID: 271143
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 8790 CUYAMACA ST STE A
 SANTEE, CA 92071-4295
 Phone: (619) 596-5969
 Fax: (619) 596-5970
 After Hours Phone: (619)
 596-5969
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

License number: PT26121
NPI: 1265454557
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MONROE, MAX

Provider ID: 126576
Board Certified Specialty: No
SAN DIEGO SPINE AND
SPORT INC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax:
After Hours Phone: (619)
596-5969
Provider Gender: Male
License number: PT294368
NPI: 1295234433
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-F 7AM-6PM, SA
7AM-2PM
Website:
www.spineandsport.com
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

MONROE, MAX

Provider ID: 269925
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619)
596-5969
Provider Gender: Male
License number: PT294368
NPI: 1295234433
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROUILLARD, NORMA K

Provider ID: 269600
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
8790 CUYAMACA ST STE A
SANTEE, CA 92071-4295
Phone: (619) 596-5969
Fax: (619) 596-5970
After Hours Phone: (619)
596-5969
Provider Gender: Female
License number: PT29262
NPI: 1194727305
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SOLANA BEACH

DERMATOLOGY

GILBOA, RUTH, MD

Provider ID: 269415
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
530 LOMAS SANTA FE DR STE
D
SOLANA BEACH, CA
92075-1346
Phone: (858) 259-0056
Fax: (858) 259-0187
After Hours Phone: (858)
259-0056
Provider Gender: Female
License number: A46557
NPI: 1205873197
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City
Hospital West
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

D. Directorio de proveedores de atención especializada

Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ROSS, ANDREW L , MD

Provider ID: 269335
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
530 LOMAS SANTA FE DR STE
D
SOLANA BEACH, CA
92075-1346
Phone: (858) 259-0056
Fax: (858) 259-0187
After Hours Phone: (858)
259-0056
Provider Gender: Male
License number: A140430
NPI: 1700140738
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

VENKAT, ARUN P , MD

Provider ID: 269346
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
530 LOMAS SANTA FE DR STE
D
SOLANA BEACH, CA
92075-1346

Phone: (858) 259-2256
Fax: (858) 259-0187
After Hours Phone: (858)
259-2256
Provider Gender: Male
License number: A125103
NPI: 1952436354
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HEARING AID DEALER / SUPPLIER

DANDURAND, JOHN M , MD

Provider ID: 269779
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
740 LOMAS SANTA FE DR STE
110
SOLANA BEACH, CA
92075-1441
Phone: (858) 259-4182
Fax: (805) 530-3989
After Hours Phone: (858)
259-4182
Provider Gender: Male
License number: HA2056
NPI: 1497901680
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes

Min/Max Age: 0/999
American Sign Language (ASL):
No
♿ Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SPRING VALLEY

FAMILY PRACTICE

CARDONES, ARTHUR J

Provider ID: 25609
Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Provider Gender: Male
License number: A55932
NPI: 1962436451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Tagalog
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc

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D. Directorio de proveedores de atención especializada

IPA: CONSTANTINO, STEPHANIE L <i>Provider ID:</i> 128126 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A149063 <i>NPI:</i> 1366824971 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Mandarin <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc IPA:	SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> 20A14919 <i>NPI:</i> 1619397031 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Mercy Hospital, Grossmont Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc IPA:	Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Sharp Memorial Hospital, Scripps Mercy Hospital, Chula Vista, Sharp Mary Birch Hosp For Women And Newborns <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> ME <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> www.fhcsd.org <i>Email:</i> <i>Medical Group(s):</i> Grossmont Spring Valley Family Hlth Ctrs Inc IPA:
OBSTETRICS / GYNECOLOGY ALIMONOS, LYSISTRATI A <i>Provider ID:</i> 114830 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD	BUECHNER, CHARLENE A <i>Provider ID:</i> 127438 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Female <i>License number:</i> A68463 <i>NPI:</i> 1376663831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	CARTER, KHALIL J <i>Provider ID:</i> 127378 <i>Board Certified Specialty:</i> No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2555 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2555 <i>Provider Gender:</i> Male <i>License number:</i> A113001 <i>NPI:</i> 1225231582 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Grossmont Hospital, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> None <i>American Sign Language (ASL):</i>

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D. Directorio de proveedores de atención especializada

No Accessibility: ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc IPA:	FOLCH TORRES-AGUIAR, BEATRIZ M Provider ID: 120515 Board Certified Specialty: No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2555 Fax: After Hours Phone: (619) 515-2555 Provider Gender: Female License number: A148014 NPI: 1457794752 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc IPA:	Phone: (619) 515-2555 Fax: After Hours Phone: (619) 515-2555 Provider Gender: Female License number: A72005 NPI: 1649208711 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Grossmont Hospital, Sharp Coronado Hosp And Healthcare Ctr Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc IPA:
CERVANTES, SANDRA M Provider ID: 114873 Board Certified Specialty: No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2555 Fax: After Hours Phone: (619) 515-2555 Provider Gender: Female License number: A118095 NPI: 1073701041 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: No Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: ME Hours: M-SA 9AM-5PM Website: www.fhcsd.org Email: Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc IPA:	LIPSCHITZ, LISA S Provider ID: 25619 Board Certified Specialty: No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035	LOEFFLER, ALLISON M Provider ID: 115547 Board Certified Specialty: No GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2555 Fax: After Hours Phone: (619) 515-2555 Provider Gender: Female License number: A116680 NPI: 1700073962 Provider English Spoken: Yes Provider Language(s) Spoken:

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D. Directorio de proveedores de atención especializada

Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc
IPA:

MELLENDEZ BERRIOS, IARA DEL M
Provider ID: 115042
Board Certified Specialty: No
 GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Provider Gender: Female
License number: A114181
NPI: 1740514249
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Grossmont Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No

☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc
IPA:

RODRIGUEZ JEREZ, ROBERTO D
Provider ID: 130082
Board Certified Specialty: No
 GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:

After Hours Phone: (619) 515-2555
Provider Gender: Male
License number: A154298
NPI: 1710316450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc
IPA:

WINESBURG, JENNIFER J
Provider ID: 114807
Board Certified Specialty: No
 GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619) 515-2555
Provider Gender: Female
License number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy Hospital, Sharp Coronado Hosp And Healthcare Ctr, Grossmont Hospital, Desert Regional Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
 ☞ *Accessibility:* ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont Spring Valley Family Hlth Ctrs Inc
IPA:

ZIEG, ALAN J
Provider ID: 25637
Board Certified Specialty: No
 GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 8788 JAMACHA RD

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D. Directorio de proveedores de atención especializada

SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Provider Gender: Male
License number: G78814
NPI: 1699790634
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Grossmont
Hospital, Scripps Mercy Hospital,
Sharp Coronado Hosp And
Healthcare Ctr, Scripps Mercy
Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc
IPA:

PHYSICIANS ASSISTANT

LOPEZ, MARIO A
Provider ID: 115102
Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Provider Gender: Male

License number: PA21385
NPI: 1932335080
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org
Email:
Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc
IPA:

TURNER, ERIC M
Provider ID: 122064
Board Certified Specialty: No
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2555
Fax:
After Hours Phone: (619)
515-2555
Provider Gender: Male
License number: PA55067
NPI: 1669756128
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: ME
Hours: M-SA 9AM-5PM
Website: www.fhcsd.org

Email:
Medical Group(s): Grossmont
Spring Valley Family Hlth Ctrs
Inc
IPA:

VISTA

ALLERGY IMMUNOLOGY

ZIERING, ROBERT W
Provider ID: 26578
Board Certified Specialty: No
ALLERGY AND IMMUNOLOGY
2067 W VISTA WAY STE 140
VISTA, CA 92083-6032
Phone: (760) 941-4444
Fax: (760) 941-8902
After Hours Phone: (760)
941-4444
Provider Gender: Male
License number: A30813
NPI: 1215933148
Provider English Spoken: Yes
Provider Language(s) Spoken:
Dutch, French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
Medical Ctr, Palomar Medical
Center, Rady Childrens Hospital
San Diego
Medi-Cal Open Panel: No
Min/Max Age: None
American Sign Language (ASL):
No
♿ Accessibility: W
Hours: M-TH 8:30AM-4PM, F
7:30AM-4PM, SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

ZIERING, ROBERT W , MD
Provider ID: 269520

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D. Directorio de proveedores de atención especializada

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2067 W VISTA WAY STE 140
 VISTA, CA 92083-6032
Phone: (760) 941-4444
Fax: (760) 941-8902
After Hours Phone: (760) 941-4444
Provider Gender: Male
License number: A30813
NPI: 1215933148
Provider English Spoken: Yes
Provider Language(s) Spoken: Dutch, French, Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CARDIOLOGY

KABRA, ASHISH N , MD
Provider ID: 271714
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 2067 W VISTA WAY STE 225
 VISTA, CA 92083-6001
Phone: (760) 224-7766
Fax: (760) 450-9655
After Hours Phone: (760) 224-7766
Provider Gender: Male
License number: A122620
NPI: 1639373798

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

CERTIFIED NURSE PRACTITIONER

ALVAREZ, LISA J
Provider ID: 278537
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 414-3892
Fax: (760) 631-5000
After Hours Phone: (760) 414-3892
Provider Gender: Female
License number: NP19911
NPI: 1417262718
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:

Medical Group(s):
IPA: Community Care Ipa Llc

AYELE, MAHOGANY A
Provider ID: 257586
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP19570
NPI: 1902120421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL): No
 ☯ *Accessibility:*
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health Plan Direct

AYELE, MAHOGANY A
Provider ID: 257587
Board Certified Specialty: No
BLUE SHIELD PROMISE HEALTH PLAN DIRECT
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (844) 308-5003
Fax: (760) 414-3763
After Hours Phone: (844) 308-5003
Provider Gender: Female

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D. Directorio de proveedores de atención especializada

License number: NP19570

NPI: 1902120421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Blue Shield Promise Health Plan Direct

BROMAN, GRETCHEN L

Provider ID: 280191

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

License number: NP95007885

NPI: 1922421288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

BROMAN, GRETCHEN L

Provider ID: 280193

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

License number: NP95007885

NPI: 1922421288

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/0

American Sign Language (ASL):

No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CHAMBERLIN, KALIANA, NPA

Provider ID: 271067

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

License number: NP95013030

NPI: 1457995706

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:*

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CLARK, CYNTHIA, NPA

Provider ID: 240000

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Provider Gender: Female

License number: NP16833

NPI: 1679698849

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: No

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL):
No

♿ *Accessibility:* W

Hours: M-SA 9AM-5PM

Website:

Email:

Medical Group(s):

IPA: Community Care Ipa Llc

CORY, ALLISON H , NPA

Provider ID: 245207

Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP20497
NPI: 1194027706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DEKKERS-O'HARE, INGRID F , NPA

Provider ID: 241299
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP8665
NPI: 1013938968
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EKLUND, BONNIE L , NPA

Provider ID: 243623
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP15285
NPI: 1811978992
Provider English Spoken: Yes
Provider Language(s) Spoken:
French

Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

EKLUND, BONNIE L , NPA

Provider ID: 243624
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: (760) 631-5000
Fax: (760) 414-3763
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: NP15285
NPI: 1811978992
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 18/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

HALGEDAHL, YI T , NPA

Provider ID: 241907
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
License number: NP95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No

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D. Directorio de proveedores de atención especializada

☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

KORMANIK, PATRICIA A

Provider ID: 282072
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 License number: NP9707
 NPI: 1093895047
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical
 Ctr, Ucsd La Jolla John Sally
 Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

KOUSARI, JHALEH, NPA

Provider ID: 239793
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 License number: NP20893
 NPI: 1811262405
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Farsi, Spanish
 Cultural Competency: No
 Hospital Affiliation: Scripps
 Green Hospital, Scripps
 Memorial Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

METZGER, JULIA

Provider ID: 262139
 Board Certified Specialty: No
 RADY CHILDRENS HEALTH
 NETWORK
 2067 W VISTA WAY STE 180
 VISTA, CA 92083-6033
 Phone: (760) 945-3434
 Fax: (760) 945-6761
 After Hours Phone: (760)
 945-3434
 Provider Gender: Female
 License number: NP95010547
 NPI: 1982050514
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: No
 Min/Max Age: 0/18

American Sign Language (ASL):
 No
 ☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Rady Childrens Health
 Network

NICHOLAS, ESTELA M , NPA

Provider ID: 239866
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760)
 631-5000
 Provider Gender: Female
 License number: NP11448
 NPI: 1558384792
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):
 No

☯ Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PATEMAN, CAROLYN U , NPA

Provider ID: 239976
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 License number: NP10896
 NPI: 1205859444
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

PRITZKER, JOELY R , NPA
 Provider ID: 239773
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 License number: NP95000955
 NPI: 1619384351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 12/999
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc
SMITH, SHARON T , NPA
 Provider ID: 242508
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 License number: RN428876
 NPI: 1780603597
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SMITH, SHARON T , NPA
 Provider ID: 242508
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760) 631-5000
 Provider Gender: Female
 License number: NP15444
 NPI: 1780603597
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: No
 Hospital Affiliation:
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

SRILASAK, MICHELE
 Provider ID: 281857
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: NP13694
 NPI: 1265487326
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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D. Directorio de proveedores de atención especializada

No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	Medical Group(s): Vista Community Clinic IPA:	HEMATOLOGY / ONCOLOGY
FAMILY PRACTICE	GYNECOLOGIC ONCOLOGY	SIDDIQUI, FAREEHA H Provider ID: 282173 Board Certified Specialty: No UCSD MEDICAL GROUP 910 SYCAMORE AVE STE 102 VISTA, CA 92081-7833 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female License number: A108879 NPI: 1104848720 Provider English Spoken: Yes Provider Language(s) Spoken: French, Spanish, Urdu Cultural Competency: No Hospital Affiliation: Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: P, EB, IB, E, R, T Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group
KETCHEL, CLINT Provider ID: 100838 Board Certified Specialty: No VISTA COMMUNITY CLNC 1000 VALE TERRACE DR VISTA, CA 92084-5218 Phone: (760) 631-5000 Fax: After Hours Phone: (760) 631-5000 Provider Gender: Male License number: A135564 NPI: 1699038125 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic, Spanish, Syriac Cultural Competency: No Hospital Affiliation: Southwest Healthcare System Murrieta, Southwest Healthcare System Wildomar, Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Whittier Hospital Medical Center Medi-Cal Open Panel: Yes Min/Max Age: None American Sign Language (ASL): No Accessibility: P, EB, IB, E, T, W, ME Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM Website: www.vistacommunityclinic.org Email:	ESKANDER, RAMEZ N Provider ID: 282163 Board Certified Specialty: No UCSD MEDICAL GROUP 910 SYCAMORE AVE STE 102 VISTA, CA 92081-7833 Phone: (760) 536-7737 Fax: (760) 536-7959 After Hours Phone: (760) 536-7737 Provider Gender: Male License number: A102482 NPI: 1144486929 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: No Hospital Affiliation: University Of California Irvine Med Ctr, Earl And Lorraine Miller Childrens Hsp, Long Beach Memorial Med Ctr, Providence St Joseph Hospital, Providence St Jude Medical Center, Orange Coast Mem Med Ctr, Fountain Valley Regional Hosp And Med Ctr, Corona Regional Med Ctr, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr Medi-Cal Open Panel: Yes Min/Max Age: 0/999 American Sign Language (ASL): No Accessibility: Hours: M-SA 9AM-5PM Website: Email: Medical Group(s): IPA: Ucsd Medical Group	SUBRAMANIAN, RUPA Provider ID: 282181 Board Certified Specialty: No UCSD MEDICAL GROUP 910 SYCAMORE AVE STE 102 VISTA, CA 92081-7833

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D. Directorio de proveedores de atención especializada

Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A67026
 NPI: 1376547174
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Tamil
 Cultural Competency: No
 Hospital Affiliation: Corona Regional Med Ctr, Tri City Medical Ctr, Ucsd Medical Ctr, Scripps Memorial Hospital Encinitas, Fountain Valley Regional Hosp And Med Ctr, University Of California Irvine Med Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, E, R, T
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA T
 Provider ID: 282128
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female

License number: A119245
 NPI: 1811200652
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

NEONATAL / PERINATAL MEDICINE

MOVAHHEDIAN, HAMID R , MD
 Provider ID: 246863
 Board Certified Specialty: No
 COMMUNITY CARE IPA LLC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax:
 After Hours Phone: (760) 631-5000
 Provider Gender: Male
 License number: A49253
 NPI: 1619920816
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Faroese, Farsi
 Cultural Competency: No
 Hospital Affiliation: Tri City Medical Ctr
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/1
 American Sign Language (ASL): No

Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Community Care Ipa Llc

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA S
 Provider ID: 282168
 Board Certified Specialty: No
 UCSD MEDICAL GROUP
 910 SYCAMORE AVE STE 102
 VISTA, CA 92081-7833
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 License number: A149945
 NPI: 1174758031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency: No
 Hospital Affiliation: Ucsd Medical Ctr, Ucsd La Jolla John Sally Thornton
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0/999
 American Sign Language (ASL): No
 Accessibility:
 Hours: M-SA 9AM-5PM
 Website:
 Email:
 Medical Group(s):
 IPA: Ucsd Medical Group

LOPEZ, SANDRA
 Provider ID: 77549
 Board Certified Specialty: No
 VISTA COMMUNITY CLNC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

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D. Directorio de proveedores de atención especializada

Phone: (760) 631-5000
Fax: (858) 715-1316
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A73316
NPI: 1962421651
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr, Palomar Medical Center, Sharp Chula Vista Med Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
Website: www.vistacommunityclinic.org
Email:
Medical Group(s): Vista Community Clinic
IPA:

PEDIATRICS

HOKE, EILEEN M

Provider ID: 121167
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (844) 308-5003
Fax:
After Hours Phone: (844) 308-5003
Provider Gender: Female
License number: A62558
NPI: 1528031457

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
Website: www.vistacommunityclinic.org
Email:
Medical Group(s): Vista Community Clinic
IPA:

PARK, SUE A

Provider ID: 24766
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A64003
NPI: 1538176201
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F

8AM-5PM, SA 9AM-4PM
Website: www.vistacommunityclinic.org
Email:
Medical Group(s): Vista Community Clinic
IPA:

RAHIMI, NASSRIN

Provider ID: 24779
Board Certified Specialty: No
IHP VISTA COMMUNITY CLINIC
VALE TERRACE
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760) 631-5000
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: No
Hospital Affiliation: Tri City Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL): No
Accessibility: P, EB, IB, E, T, W, ME
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 9AM-4PM
Website: www.vistacommunityclinic.org
Email:
Medical Group(s): Vista Community Clinic
IPA: Blue Shield Promise Health Plan Direct

RAHIMI, NASSRIN

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D. Directorio de proveedores de atención especializada

Provider ID: 24779
Board Certified Specialty: No
VISTA COMMUNITY CLNC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax:
After Hours Phone: (760)
631-5000
Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: None
American Sign Language (ASL):
 No
Accessibility: P, EB, IB, E, T,
 W, ME
Hours: M-TH 8AM-8PM, F
 8AM-5PM, SA 9AM-4PM
Website:
 www.vistacommunityclinic.org
Email:
Medical Group(s): Vista
 Community Clinic
IPA: Blue Shield Promise Health
 Plan Direct

RAHIMI, NASSRIN

Provider ID: 257581
Board Certified Specialty: No
BLUE SHIELD PROMISE
HEALTH PLAN DIRECT
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000

Provider Gender: Female
License number: A56214
NPI: 1063438166
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/18
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Blue Shield Promise Health
 Plan Direct

PHYSICIANS ASSISTANT

WALLACE, STEPHANIE C , NPA

Provider ID: 239770
Board Certified Specialty: Yes
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Provider Gender: Female
License number: PA19629
NPI: 1518104942
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: No
Hospital Affiliation: Tri City
 Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999

American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

RADIOLOGY

ALLEN, DERRICK R , MD

Provider ID: 269616
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (858) 888-4444
Fax: (866) 558-4329
After Hours Phone: (858)
 888-4444
Provider Gender: Male
License number: A69840
NPI: 1215982970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
 Hospital, Scripps Mercy Hospital
 Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
 No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

DOEMENY, JOHN M

Provider ID: 269754
Board Certified Specialty: No
COMMUNITY CARE IPA LLC

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D. Directorio de proveedores de atención especializada

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (858) 888-4444
Fax: (866) 558-4329
After Hours Phone: (858) 888-4444
Provider Gender: Male
License number: G50925
NPI: 1841243912
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital
Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

MOFFIT, BRIAN J

Provider ID: 269532
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (858) 888-4444
Fax: (866) 558-4329
After Hours Phone: (858) 888-4444
Provider Gender: Male
License number: G51551
NPI: 1508817305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation: Scripps Mercy
Hospital, Scripps Mercy Hospital

Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0/999
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER S

Provider ID: 248009
Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2067 W VISTA WAY STE 185
VISTA, CA 92083-6033
Phone: (760) 631-5888
Fax: (760) 631-5880
After Hours Phone: (760) 591-7750
Provider Gender: Male
License number: PT26311
NPI: 1114977535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 8/125
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SMITH, DENNIS R

Provider ID: 247478

Board Certified Specialty: No
COMMUNITY CARE IPA LLC
2067 W VISTA WAY STE 185
VISTA, CA 92083-6033
Phone: (760) 631-5888
Fax: (760) 631-5880
After Hours Phone: (760) 631-5888
Provider Gender: Male
License number: PT22171
NPI: 1699724054
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: No
Hospital Affiliation:
Medi-Cal Open Panel: Yes
Min/Max Age: 8/125
American Sign Language (ASL):
No
Accessibility:
Hours: M-SA 9AM-5PM
Website:
Email:
Medical Group(s):
IPA: Community Care Ipa Llc

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282144
Board Certified Specialty: No
UCSD MEDICAL GROUP
910 SYCAMORE AVE STE 102
VISTA, CA 92081-7833
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
License number: A118231
NPI: 1861759383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: No

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D. Directorio de proveedores de atención especializada

<i>Hospital Affiliation:</i> Medical Ctr At Ucsf, Ucsf Medical Center At Mission Bay, Ucsf Medical Center At Mount Zion, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Ucsd Medical Group	<i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	<i>Phone:</i> (760) 300-3647 <i>Fax:</i> (760) 482-1316 <i>After Hours Phone:</i> (760) 300-3647 <i>Provider Gender:</i> Female <i>License number:</i> G88851 <i>NPI:</i> 1184687337 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Scripps Memorial Hospital Encinitas, Tri City Medical Ctr, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 13/100 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc
FIERER, ADAM S <i>Provider ID:</i> 86667 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2385 S MELROSE DR VISTA, CA 92081-8788 <i>Phone:</i> (760) 300-3647 <i>Fax:</i> (760) 482-1316 <i>After Hours Phone:</i> (760) 300-3647 <i>Provider Gender:</i> Male <i>License number:</i> G69685 <i>NPI:</i> 1205831161 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Palomar Medical Center <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i>	GROVE, JAY R , MD <i>Provider ID:</i> 245227 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2385 S MELROSE DR VISTA, CA 92081-8788 <i>Phone:</i> (760) 300-3647 <i>Fax:</i> (760) 482-1316 <i>After Hours Phone:</i> (760) 300-3647 <i>Provider Gender:</i> Male <i>License number:</i> A60426 <i>NPI:</i> 1912971334 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>Hospital Affiliation:</i> Pomerado Hospital, Palomar Medical Center, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital <i>Medi-Cal Open Panel:</i> Yes <i>Min/Max Age:</i> 0/999 <i>American Sign Language (ASL):</i> No <i>Accessibility:</i> <i>Hours:</i> M-SA 9AM-5PM <i>Website:</i> <i>Email:</i> <i>Medical Group(s):</i> <i>IPA:</i> Community Care Ipa Llc	
	HANNA, KAREN J , MD <i>Provider ID:</i> 246422 <i>Board Certified Specialty:</i> No COMMUNITY CARE IPA LLC 2385 S MELROSE DR VISTA, CA 92081-8788	

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E. Directorio de hospitales - Hospital general de atención aguda

ALVARADO HOSPITAL LLC

Provider ID: 170056
6655 ALVARADO RD
SAN DIEGO, CA 92120-5208
Phone: (619) 287-3270
After Hours Phone: (619) 287-3270
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1265468946
Website:
www.alvaradohospital.com
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

GROSSMONT HOSPITAL

Provider ID: 170046
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (619) 465-0711
After Hours Phone: (619) 465-0711
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000006
NPI: 1528041811

Website:
www.sharp.com/hospitals/grossmont/
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663
1940 EL CAJON BLVD
SAN DIEGO, CA 92104-1005
Phone: (619) 543-4500
After Hours Phone: (619) 543-4500
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1992880512
Website:
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

PALOMAR MEDICAL CENTER

Provider ID: 173011
2185 CITRACADO PKWY
ESCONDIDO, CA 92029-4159
Phone: (442) 281-5000
After Hours Phone: (442) 281-5000
Accepting New Patients: No
Min/Max Age: None

Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000083
NPI: 1457321317
Website:
www.palomarhealth.org/facilities/palomar-medical-center
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

PARADISE VALLEY HOSPITAL

Provider ID: 170057
2400 E 4TH ST
NATIONAL CITY, CA 91950-2026
Phone: (619) 470-4321
After Hours Phone: (619) 470-4321
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:
NPI: 1356410351
Website:
www.paradisevalleyhospital.net
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

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E. Directorio de hospitales - Hospital general de atención aguda

POMERADO HOSPITAL

Provider ID: 170052
15615 POMERADO RD
POWAY, CA 92064-2405
Phone: (858) 613-4000
After Hours Phone: (858) 613-4000
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000127
NPI: 1376513754
Website:
www.palomarhealth.org/facilities/palomar-poway-outpatient
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083
3020 CHILDRENS WAY
SAN DIEGO, CA 92123-4223
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number:

NPI: 1710065933
Website: www.rchsd.org
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS GREEN HOSPITAL

Provider ID: 171084
10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
Phone: (858) 455-9100
After Hours Phone: (858) 455-9100
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000139
NPI: 1841233780
Website:

www.scripps.org/locations/hospitals__scripps-green-hospital
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045
9888 GENESEE AVE
LA JOLLA, CA 92037-1205
Phone: (858) 457-4123
After Hours Phone: (858) 457-4123

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000050
NPI: 1841277704
Website:
www.scripps.org/locations/hospitals__scripps-memorial-hospital-la-jolla
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305
354 SANTA FE DR
ENCINITAS, CA 92024-5142
Phone: (760) 753-6501
After Hours Phone: (760) 753-6501
Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status: JCAHO
Hours: M-SA 9AM-5PM
License number: 080000148
NPI: 1700829199
Website:
www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas
American Sign Language (ASL): No

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

E. Directorio de hospitales - Hospital general de atención aguda

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

SCRIPPS MERCY HOSPITAL

Provider ID: 170048
4077 5TH AVE
SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
After Hours Phone: (619)
294-8111

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status:
JCAHO

Hours: M-SA 9AM-5PM
License number:
NPI: 1659359446
Website:
www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256
435 H ST
CHULA VISTA, CA 91910-4307
Phone: (619) 691-7000
After Hours Phone: (619)
691-7000

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:

Cultural Competency: No
Hospital Accreditation Status:
JCAHO
Hours: M-SA 9AM-5PM
License number: 090000074
NPI: 1306161914
Website:

www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

SHARP CHULA VISTA MED CTR

Provider ID: 170251
751 MEDICAL CENTER CT
CHULA VISTA, CA 91911-6617
Phone: (619) 502-5800
After Hours Phone: (619)
502-5800

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status:
JCAHO

Hours: M-SA 9AM-5PM
License number: 090000008
NPI: 1396728630
Website:
www.sharp.com/hospitals/chula-vista/
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252
250 PROSPECT PL
CORONADO, CA 92118-1943
Phone: (619) 522-3600
After Hours Phone: (619)
522-3600

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status:
JCAHO

Hours: M-SA 9AM-5PM
License number:
NPI: 1154304475
Website:
www.sharp.com/hospitals/coronado/
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123-2700
Phone: (858) 939-3400
After Hours Phone: (858)
939-3400

Accepting New Patients: No
Min/Max Age: None
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
Hospital Accreditation Status:
JCAHO

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E. Directorio de hospitales - Hospital general de atención aguda

Hours: M-SA 9AM-5PM
 License number: 080000039
 NPI: 1407839921
 Website:
 www.specialtyobstetrics.com
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

SHARP MEMORIAL HOSPITAL

Provider ID: 170047
 7901 FROST ST
 SAN DIEGO, CA 92123-2701
 Phone: (858) 499-4352
 After Hours Phone: (858)
 499-4352
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1407839921
 Website:
 www.sharp.com/hospitals/memor
 ial/
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

TRI CITY MEDICAL CTR

Provider ID: 170049
 4002 VISTA WAY
 OCEANSIDE, CA 92056-4506

Phone: (760) 724-8411
 After Hours Phone: (760)
 724-8411
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1801861190
 Website: www.tricitymed.org
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037-1300
 Phone: (858) 657-7000
 After Hours Phone: (858)
 657-7000
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number: 090000101
 NPI: 1497021265
 Website:
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2

mile from Site): Yes

UCSD MEDICAL CTR

Provider ID: 170051
 200 W ARBOR DR
 SAN DIEGO, CA 92103-1911
 Phone: (619) 543-6222
 After Hours Phone: (619)
 543-6222
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM
 License number: 090000101
 NPI: 1184722779
 Website:
[https://health.ucsd.edu/locations/
 pages/hillcrest.aspx](https://health.ucsd.edu/locations/pages/hillcrest.aspx)
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Public transportation (within 1/2
 mile from Site): Yes

VIBRA HOSPITAL OF SAN DIEGO

Provider ID: 170165
 555 WASHINGTON ST
 SAN DIEGO, CA 92103-2289
 Phone: (619) 260-8300
 After Hours Phone: (619)
 260-8300
 Accepting New Patients: No
 Min/Max Age: None
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 Hospital Accreditation Status:
 JCAHO
 Hours: M-SA 9AM-5PM

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E. Directorio de hospitales - Hospital general de atención aguda

License number: 090000404

NPI: 1639172133

Website:

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

*Public transportation (within 1/2
mile from Site):* Yes

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F. Centros de enfermería especializada

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998
 751 MEDICAL CENTER CT
 CHULA VISTA, CA 91911-6617
 Phone: (619) 502-3600
 Fax: (619) 502-5835
 After Hours Phone: (619) 502-3600
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1538142369
 Website:
www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

SOUTH BAY POST ACUTE CARE

Provider ID: 394308
 553 F ST
 CHULA VISTA, CA 91910-3515
 Phone: (619) 426-8611
 Fax: (619) 427-0780
 After Hours Phone: (619) 426-8611
 Accepting New Patients: No
 Hours: M-F 9AM-5PM, SA 9AM-5PM
 License number: 090000120
 NPI: 1376946277
 Website:
<http://southbaypostacute.com>

Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Filipino, Pilipino
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

CORONADO

VILLA CORONADO CONVALESCENT

Provider ID: 172644
 233 PROSPECT PL
 CORONADO, CA 92118-1967
 Phone: (619) 552-3900
 Fax:
 After Hours Phone: (619) 552-3900
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1184607418
 Website:
www.sharp.com/hospitals/coronado/departments/long-term-care.cfm
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985
 510 E WASHINGTON AVE

EL CAJON, CA 92020-5324
 Phone: (619) 440-1211
 Fax: (619) 440-4956
 After Hours Phone: (619) 440-1211
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number: 090000117
 NPI: 1568484517
 Website:
www.avocadopostacute.com
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983
 1391 E MADISON AVE
 EL CAJON, CA 92021-8568
 Phone: (619) 444-1107
 Fax: (619) 444-1403
 After Hours Phone: (619) 444-1107
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1013953199
 Website:
<http://cottonwoodcanyonhc.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: P, R, W
 Public transportation (within 1/2 mile from Site): Yes

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F. Centros de enfermería especializada

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853
 1580 BROADWAY
 EL CAJON, CA 92021-5124
Phone: (619) 441-8745
Fax: (619) 442-2553
After Hours Phone: (619) 441-8745
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 08000361
NPI: 1700973963
Website: www.countryhills.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language,
 Arabic, Korean, Spanish,
 Tagalog, Farsi, Vietnamese,
 Mandarin
Cultural Competency: No
American Sign Language (ASL):
 Yes
 ♿ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

MAGNOLIA POST ACUTE CARE

Provider ID: 380518
 635 S MAGNOLIA AVE
 EL CAJON, CA 92020-6012
Phone: (616) 442-8826
Fax: (619) 442-0288
After Hours Phone: (616) 442-8826
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000072
NPI: 1316340227
Website:
Credentials and/or certifications:
Site English Spoken: Yes

Site Language(s) Spoken:
 Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923
 444 W LEXINGTON AVE
 EL CAJON, CA 92020-4416
Phone: (619) 442-7744
Fax: (619) 447-0641
After Hours Phone: (619) 442-7744
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000068
NPI: 1447653340
Website: <http://parksidehealth.net>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* P, EB, IB, E, R, T, W
Public transportation (within 1/2 mile from Site): Yes

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508
 1201 S ORANGE AVE
 EL CAJON, CA 92020-7521
Phone: (619) 441-1988
Fax: (619) 441-7416
After Hours Phone: (619) 441-1988
Accepting New Patients: No
Hours: M-SA 9AM-5PM

License number:
 NPI: 1285061085
Website: <http://sdpostacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

SOMERSET SUBACUTE AND CARE

Provider ID: 348526
 151 CLAYDELLE AVE
 EL CAJON, CA 92020-4505
Phone: (619) 442-0245
Fax: (614) 423-3631
After Hours Phone: (619) 442-0245
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000027
NPI: 1073916987
Website:
<http://somensetsubacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Cultural Competency: No
American Sign Language (ASL):
 No
 ♿ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

THE BRADLEY COURT

Provider ID: 419158
 675 E BRADLEY AVE
 EL CAJON, CA 92021-3110

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F. Centros de enfermería especializada

Phone: (619) 448-6633
 Fax: (619) 448-5462
 After Hours Phone: (619) 448-6633
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1629129267
 Website:
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL): No
 ♿ Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

VICTORIA POST ACUTE CARE

Provider ID: 387720
 654 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 440-5005
 Fax: (619) 442-8271
 After Hours Phone: (619) 440-5005
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000025
 NPI: 1326441239
 Website:
<http://victoriapostacute.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Public transportation (within 1/2 mile from Site): Yes

VICTORIA POST ACUTE CARE

Provider ID: 387720
 654 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 440-5005
 Fax: (619) 442-8271
 After Hours Phone: (619) 440-5005
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000025
 NPI: 1326441239
 Website:
www.victoriapostacute.com
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 ♿ Accessibility: P, EB, IB, E, R, T, W
 Public transportation (within 1/2 mile from Site): Yes

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020
 622 S ANZA ST
 EL CAJON, CA 92020-6602
 Phone: (619) 442-0544
 Fax: (619) 442-6177
 After Hours Phone: (619) 442-0544
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1023048295
 Website:
<http://villalaspalmascare.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No

American Sign Language (ASL): No
 ♿ Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

ENCINITAS

AVIARA HEALTHCARE CENTER

Provider ID: 171995
 944 REGAL RD
 ENCINITAS, CA 92024-4634
 Phone: (760) 944-0331
 Fax: (760) 634-1337
 After Hours Phone: (760) 944-0331
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1518146620
 Website:
<http://aviarahealthcare.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL): No
 ♿ Accessibility: P, R, W
 Public transportation (within 1/2 mile from Site): Yes

ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977
 900 SANTA FE DR
 ENCINITAS, CA 92024-3919
 Phone: (760) 753-6423
 Fax: (760) 753-4979
 After Hours Phone: (760) 753-6423
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM

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F. Centros de enfermería especializada

License number:
NPI: 1265415749
Website:
<https://www.covenantcare.com/stores/encinitas-nursing-and-rehabilitation-center/>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Russian, Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, W
Public transportation (within 1/2 mile from Site): Yes

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027
 421 E MISSION AVE
 ESCONDIDO, CA 92025-1909
Phone: (760) 747-0430
Fax: (760) 747-0569
After Hours Phone: (760) 747-0430
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1588660765
Website:
<http://escondidopostacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, R, W
Public transportation (within 1/2 mile from Site): Yes

LIFE CARE CENTER OF

ESCONDIDO
Provider ID: 172010
 1980 FELICITA RD
 ESCONDIDO, CA 92025-5922
Phone: (760) 741-6109
Fax: (760) 741-5237
After Hours Phone: (760) 741-6109
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1386681286
Website:
<http://lifecarecenterofescondido.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Cultural Competency: No
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Public transportation (within 1/2 mile from Site): No

PALOMAR HEIGHTS CARE CTR

Provider ID: 170055
 1260 E OHIO AVE
 ESCONDIDO, CA 92027-3054
Phone: (760) 746-1100
Fax: (760) 746-1201
After Hours Phone: (760) 746-1100
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1255337440
Website:
<http://palomarheightsrehab.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Cultural Competency: No

American Sign Language (ASL): No
 ☯ *Accessibility:* P, EB, IB, R, W
Public transportation (within 1/2 mile from Site): Yes

PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988
 201 N FIG ST
 ESCONDIDO, CA 92025-3416
Phone: (760) 746-0303
Fax: (760) 738-1749
After Hours Phone: (760) 746-0303
Accepting New Patients: No
Hours: M-F, SU 12AM-11:59PM, SA 9AM-5PM
License number:
NPI: 1861491490
Website: <http://palomarvista.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Cultural Competency: No
American Sign Language (ASL): No
 ☯ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

VALLE VISTA POST ACUTE

Provider ID: 171968
 1025 W 2ND AVE
 ESCONDIDO, CA 92025-3839
Phone: (760) 745-1842
Fax: (760) 745-4346
After Hours Phone: (760) 745-1842
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1659369262

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F. Centros de enfermería especializada

Website:

<https://www.covenantcare.com/stores/valle-vista-convalescent-hospital/>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: P, EB, IB, R, T,

W

Public transportation (within 1/2 mile from Site): Yes

LA MESA

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643

5555 GROSSMONT CENTER

DR, DO NOT USE

LA MESA, CA 91942

Phone: (619) 740-4110

Fax:

After Hours Phone: (619)

740-4110

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1417930249

Website:

www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD

LA JOLLA, CA 92037-3432

Phone: (858) 453-5810

Fax: (858) 452-4301

After Hours Phone: (858)

453-5810

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1457486078

Website:

<https://www.covenantcare.com/stores/la-jolla-nursing-and-rehabilitation-center/>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

LA MESA

ARBOR HILLS NURSING CENTER

Provider ID: 172007

7800 PARKWAY DR

LA MESA, CA 91942-2001

Phone: (619) 460-2330

Fax: (619) 460-5821

After Hours Phone: (619)

460-2330

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number: 080000066

NPI: 1356345706

Website:

www.lifegen.net/arborhills/

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog, Spanish, Russian

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

CARE MERIDIAN LA MESA

Provider ID: 173379

5640 AZTEC DR

LA MESA, CA 91942-1948

Phone: (619) 403-5267

Fax: (619) 465-0019

After Hours Phone: (619)

403-5267

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1235404674

Website:

<https://www.neurorestorative.com/state-location/la-mesa>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

COMMUNITY CARE CENTER

Provider ID: 171984

8665 LA MESA BLVD

LA MESA, CA 91942-9503

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F. Centros de enfermería especializada

Phone: (619) 465-0702

Fax: (619) 828-1782

After Hours Phone: (619)
465-0702

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000033

NPI: 1225028327

Website:

www.communitycarectr.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023

5696 LAKE MURRAY BLVD

LA MESA, CA 91942-1929

Phone: (619) 460-7871

Fax: (619) 460-4810

After Hours Phone: (619)
460-7871

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 080000020

NPI: 1457345001

Website:

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

GROSSMONT POST ACUTE CARE

Provider ID: 310488

8787 CENTER DR

LA MESA, CA 91942-3034

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)
460-4444

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 080000024

NPI: 1689077588

Website:

http://grossmontpostacute.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

LA MESA HEALTHCARE CTR

Provider ID: 172022

3780 MASSACHUSETTS AVE

LA MESA, CA 91941-7638

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)
465-1313

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1003852666

Website:

http://lamesahealthcare.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047

7760 PARKWAY DR

LA MESA, CA 91942-2028

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number: 080000053

NPI: 1174926448

Website:

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken: Farsi,
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: P, EB, IB, R, W

Public transportation (within 1/2
mile from Site): Yes

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST

LEMON GROVE, CA

91945-2956

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)
644-1000

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000142

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F. Centros de enfermería especializada

NPI: 1760709687

Website:

www.bellavistahealth.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY

LEMON GROVE, CA

91945-2009

Phone: (619) 463-0294

Fax: (619) 461-1064

After Hours Phone: (619)

463-0294

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1336134204

Website:

http://lemongrovecare.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

541 S V AVE

NATIONAL CITY, CA

91950-2828

Phone: (619) 791-7900

Fax: (619) 791-7980

After Hours Phone: (619)

791-7900

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000294

NPI: 1497759856

Website:

www.lifegen.net/castlemanor/index.html

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE

NATIONAL CITY, CA

91950-3808

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)

791-7700

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000049

NPI: 1235133687

Website:

www.lifegen.net/friendshipmanor/

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST

NATIONAL CITY, CA

91950-2913

Phone: (619) 470-6700

Fax: (619) 470-0404

After Hours Phone: (619)

470-6700

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number: 090000141

NPI: 1275513293

Website: http://pvhcc.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency: No

American Sign Language (ASL):

No

♿ Accessibility: W

Public transportation (within 1/2 mile from Site): Yes

WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST

NATIONAL CITY, CA

91950-6705

Phone: (619) 474-6741

Fax: (619) 474-1925

After Hours Phone: (619)

474-6741

Accepting New Patients: No

Hours: M-SU 12AM-11:59PM

License number: 090000035

NPI: 1730176538

Website: www.windsorcare.com

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F. Centros de enfermería especializada

Credentials and/or certifications: POWAY, CA 92064-2500
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
 ☞ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

OCEANSIDE

LA PALOMA HEALTHCARE CTR

Provider ID: 172021
 3232 THUNDER DR
 OCEANSIDE, CA 92056-4447
Phone: (760) 724-2193
Fax: (714) 964-2137
After Hours Phone: (760) 724-2193
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1265462436
Website:
www.lapalomahealthcare.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Armenian, Korean, Tagalog
Cultural Competency: No
American Sign Language (ASL): No
 ☞ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987
 12696 MONTE VISTA RD

Phone: (858) 487-6242
Fax:
After Hours Phone: (858) 487-6242
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number: 080000251
NPI: 1073902672
Website:
<http://bouldercreekpa.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

POWAY HEALTHCARE CENTER

Provider ID: 171989
 15632 POMERADO RD
 POWAY, CA 92064-2406
Phone: (858) 485-5153
Fax: (858) 485-7694
After Hours Phone: (858) 485-5153
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:
NPI: 1407035512
Website: <http://powaycare.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
 ☞ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

VILLA POMERADO

Provider ID: 172642
 15615 POMERADO RD
 POWAY, CA 92064-2405
Phone: (858) 613-4545
Fax:
After Hours Phone: (858) 613-4545
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1619947090
Website:
www.palomarhealth.org/skilled-nursing/villa-pomerado
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
 ☞ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267
 8885 RIO SAN DIEGO DR STE 131
 SAN DIEGO, CA 92108-1625
Phone: (619) 293-3500
Fax: (619) 704-2054
After Hours Phone: (619) 293-3500
Accepting New Patients: No
Hours: M-F 8AM-5PM, SA 9AM-5PM
License number:
NPI: 1083039861
Website:
Credentials and/or certifications:
Site English Spoken: Yes

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F. Centros de enfermería especializada

Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL):
 No
 ☯ *Accessibility:* W
Public transportation (within 1/2 mile from Site): Yes

ARROYO VISTA NURSING CTR

Provider ID: 172028
 3022 45TH ST
 SAN DIEGO, CA 92105-4302
Phone: (619) 283-5855
Fax: (619) 284-6327
After Hours Phone: (619) 283-5855
Accepting New Patients: No
Hours: M-SU 9AM-5PM
License number:
NPI: 1487640066
Website:
<http://arroyovistacare.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese, Arabic, Tagalog
Cultural Competency: No
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, R, W
Public transportation (within 1/2 mile from Site): Yes

BALBOA NURSING AND REHAB CTR

Provider ID: 416840
 3520 4TH AVE
 SAN DIEGO, CA 92103-4913
Phone: (619) 291-5270
Fax: (619) 291-1671
After Hours Phone: (619) 291-5270
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM

License number: 090000057
NPI: 1578521274
Website: <http://balboahc.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: No
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, R, W
Public transportation (within 1/2 mile from Site): Yes

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971
 11895 AVENUE OF INDUSTRY
 SAN DIEGO, CA 92128-3423
Phone: (858) 673-0101
Fax: (858) 673-8320
After Hours Phone: (858) 673-0101
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1083727093
Website:
<http://carmelmountain.net>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese
Cultural Competency: No
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, R, T, W
Public transportation (within 1/2 mile from Site): Yes

JACOB HEALTH CARE

CENTER LLC

Provider ID: 172617
 4075 54TH ST
 SAN DIEGO, CA 92105-2301
Phone: (619) 582-5168
Fax: (619) 325-0194
After Hours Phone: (619) 582-5168
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000093
NPI: 1881684900
Website:
www.jacobhealthcare.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL):
 No
 ☯ *Accessibility:* P, EB, IB, R, W
Public transportation (within 1/2 mile from Site): Yes

MISSION HILLS POST ACUTE CARE

Provider ID: 339053
 3680 REYNARD WAY
 SAN DIEGO, CA 92103-3847
Phone: (619) 297-4484
Fax: (855) 214-6992
After Hours Phone: (619) 297-4484
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number: 090000032
NPI: 1669875563
Website:
<http://missionhillspostacute.com>
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
 Tagalog, Spanish
Cultural Competency: No

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F. Centros de enfermería especializada

American Sign Language (ASL): No
Accessibility: P, E, R, T, W
Public transportation (within 1/2 mile from Site): Yes

RADY CHILDRENS CONVALESCENT HOSPITAL

Provider ID: 172200
 8022 BIRMINGHAM DR
 SAN DIEGO, CA 92123-2707
Phone: (858) 966-5833
Fax: (858) 966-8558
After Hours Phone: (858) 966-5833
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1992881478
Website: www.rchsd.org
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: W
Public transportation (within 1/2 mile from Site): Yes

REO VISTA HEALTHCARE CTR

Provider ID: 171993
 6061 BANBURY ST
 SAN DIEGO, CA 92139-3624
Phone: (619) 475-2211
Fax: (619) 479-9126
After Hours Phone: (619) 475-2211
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1255499174
Website: http://reovista.com
Credentials and/or certifications:

Site English Spoken: Yes
Site Language(s) Spoken: Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: P, R, W
Public transportation (within 1/2 mile from Site): Yes

SAN DIEGO HEALTHCARE CENTER

Provider ID: 171991
 2828 MEADOW LARK DR
 SAN DIEGO, CA 92123-2710
Phone: (858) 277-6460
Fax: (858) 277-6004
After Hours Phone: (858) 277-6460
Accepting New Patients: No
Hours: M-SU 8AM-5PM
License number:
NPI: 1003098906
Website:
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: W
Public transportation (within 1/2 mile from Site): Yes

UNIVERSITY CARE CENTER

Provider ID: 172024
 5602 UNIVERSITY AVE
 SAN DIEGO, CA 92105-2308
Phone: (619) 583-1993
Fax: (619) 583-1362
After Hours Phone: (619) 583-1993
Accepting New Patients: No
Hours: M-SU 12AM-11:59PM
License number:

NPI: 1871522672
Website:
 http://universitycarecenter.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: P, R, W
Public transportation (within 1/2 mile from Site): Yes

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009
 15720 BERNARDO CENTER DR
 SAN DIEGO, CA 92127-5861
Phone: (858) 672-3900
Fax: (858) 672-9247
After Hours Phone: (858) 672-3900
Accepting New Patients: No
Hours: M-SA 9AM-5PM
License number:
NPI: 1518063437
Website:
 www.villaranchobernardo.com
Credentials and/or certifications:
Site English Spoken: Yes
Site Language(s) Spoken:
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: P, R, W
Public transportation (within 1/2 mile from Site): Yes

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012
 1201 34TH ST
 SAN DIEGO, CA 92102-2416

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F. Centros de enfermería especializada

Phone: (619) 232-2946
 Fax: (310) 595-3529
 After Hours Phone: (619) 232-2946
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number: 090000052
 NPI: 1811963028
 Website:
<https://windsorgoldenhill.com>
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: P, EB, IB, R, W
 Public transportation (within 1/2 mile from Site): Yes

SANTEE

STANFORD COURT SKILLED NURSING AND REHAB CENTER
 Provider ID: 171994
 8778 CUYAMACA ST
 SANTEE, CA 92071-4255
 Phone: (619) 449-5555
 Fax: (619) 449-4948
 After Hours Phone: (619) 449-5555
 Accepting New Patients: No
 Hours: M-SU 8AM-5PM
 License number: 080000299
 NPI: 1184628554
 Website:
www.lifegen.net/stanfordcourt/
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken: Tagalog, Spanish
 Cultural Competency: No
 American Sign Language (ASL):

No
 Accessibility: P, EB, IB, E, R, T, W
 Public transportation (within 1/2 mile from Site): Yes

SPRING VALLEY

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC
 Provider ID: 171969
 325 KEMPTON ST
 SPRING VALLEY, CA 91977-5810
 Phone: (619) 931-1151
 Fax: (224) 233-1397
 After Hours Phone: (619) 931-1151
 Accepting New Patients: No
 Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1649375403
 Website:
covivingmountmiguel.org
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC
 Provider ID: 171969
 325 KEMPTON ST
 SPRING VALLEY, CA 91977-5810
 Phone: (619) 931-1151
 Fax: (224) 233-1397
 After Hours Phone: (619) 931-1151
 Accepting New Patients: No

Hours: M-SU 12AM-11:59PM
 License number:
 NPI: 1649375403
 Website:
www.mountmiguelcovenantvillage.org
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

VISTA

LA FUENTE POST ACUTE
 Provider ID: 429590
 247 E BOBIER DR
 VISTA, CA 92084-3026
 Phone: (760) 945-3033
 Fax: (760) 945-8926
 After Hours Phone: (760) 945-3033
 Accepting New Patients: No
 Hours: M-SA 9AM-5PM
 License number:
 NPI: 1366802696
 Website:
 Credentials and/or certifications:
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Cultural Competency: No
 American Sign Language (ASL): No
 Accessibility: W
 Public transportation (within 1/2 mile from Site): Yes

LIFE CARE CENTER OF VISTA
 Provider ID: 171970
 304 N MELROSE DR
 VISTA, CA 92083-4814

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F. Centros de enfermería especializada

Phone: (760) 724-8222

Fax: (480) 296-2601

After Hours Phone: (760)
724-8222

Accepting New Patients: No

Hours: M-SA 9AM-5PM

License number:

NPI: 1811942063

Website: www.lcca.com

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

VISTA HEALTHCARE CENTER

Provider ID: 171990

247 E BOBIER DR

VISTA, CA 92084-3026

Phone: (760) 945-3033

Fax: (760) 724-3169

After Hours Phone: (760)
945-3033

Accepting New Patients: No

Hours: M-F 8AM-5PM, SA
9AM-5PM

License number:

NPI: 1912189812

Website: <http://astorhealth.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: P, R, W

Public transportation (within 1/2
mile from Site): Yes

VISTA KNOLL SPECIALIZED CARE FACILITY

Provider ID: 172017

2000 WESTWOOD RD

VISTA, CA 92083-5123

Phone: (760) 630-2273

Fax: (760) 630-0913

After Hours Phone: (760)
630-2273

Accepting New Patients: No

Hours: M-SU 8:30AM-5PM

License number:

NPI: 1275533929

Website: <http://vistaknoll.com>

Credentials and/or certifications:

Site English Spoken: Yes

Site Language(s) Spoken:

Korean, Tagalog, Vietnamese,
Spanish

Cultural Competency: No

American Sign Language (ASL):
No

♿ Accessibility: W

Public transportation (within 1/2
mile from Site): Yes

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G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

CHULA VISTA	EL CAJON	ESCONDIDO
OPEN ARMS ADHC <i>Provider ID: 417307</i> 301 E J ST CHULA VISTA, CA 91910-6223 <i>Phone: (619) 420-1404</i> <i>Fax: (619) 420-1408</i> <i>After Hours Phone: (619) 420-1404</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1598882169</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): No</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i> http://openarmsadhc.com	WESTERN ADHC <i>Provider ID: 417305</i> 240 S MAGNOLIA AVE EL CAJON, CA 92020-4524 <i>Phone: (619) 631-7222</i> <i>Fax: (619) 631-9228</i> <i>After Hours Phone: (619) 631-7222</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1821125550</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i> https://sites.google.com/site/westernadhec/contact-us	INTERFAITH COMMUNITY SERVICES <i>Provider ID: 580498</i> 250 N ASH ST ESCONDIDO, CA 92027-3026 <i>Phone: (760) 489-6380</i> <i>Fax:</i> <i>After Hours Phone: (760) 489-6380</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1932767381</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

LA MESA	NATIONAL CITY	SAN DIEGO
GOLDEN LIFE ADHC <i>Provider ID: 448456</i> 7373 UNIVERSITY AVE STE 101 LA MESA, CA 91942-0578 <i>Phone: (619) 433-3398</i> <i>Fax: (619) 337-1499</i> <i>After Hours Phone: (619) 433-3398</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Russian, Arabic, Farsi</i> <i>Hours: M-SU 8AM-4PM</i> <i>License number: NPI: 1093921900</i> <i>Accommodations for those with physical disabilities: W</i> <i>Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: Yes</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: Y</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website:</i>	HORIZONS ADHC <i>Provider ID: 417295</i> 1035 HARBISON AVE NATIONAL CITY, CA 91950-3919 <i>Phone: (619) 474-1822</i> <i>Fax: (619) 474-1826</i> <i>After Hours Phone: (619) 474-1822</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: 060000582</i> <i>NPI: 1528107273</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website: www.horizonsadhc.com</i>	CASA PACIFICA ADHCC <i>Provider ID: 417303</i> 1424 30TH ST STE C SAN DIEGO, CA 92154-3417 <i>Phone: (619) 424-8181</i> <i>Fax: (619) 424-8151</i> <i>After Hours Phone: (619) 424-8181</i> <i>Accepting New Patients: No</i> <i>Site Language(s) Spoken: Hours: M-SA 9AM-5PM</i> <i>License number: NPI: 1609920305</i> <i>Accommodations for those with physical disabilities: Public transportation (within 1/2 mile from Site): Yes</i> <i>American Sign Language (ASL): No</i> <i>Language Line interpreter services: No</i> <i>If Facility has completed cultural competence training?: No</i> <i>Facility has access to skilled medical interpreters on site?: No</i> <i>Interpreter Non-English Languages: N</i> <i>Medi-Cal: Y</i> <i>Special Expertise:</i> <i>- Physical Disabilities?:</i> <i>- Chronic Illness?:</i> <i>- HIV/AIDS?:</i> <i>- Serious Mental Illness?:</i> <i>- Homelessness?:</i> <i>- Deaf or Hard-of-Hearing?:</i> <i>- Blindness or Visual Impairment?:</i> <i>- Co-occurring Disorders?:</i> <i>If any other, please indicate:</i> <i>Website: www.casa-pacifica.com</i> LOVING CARE ADHC <i>Provider ID: 419961</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

G. Servicios Comunitarios para Adultos (CBAS, por sus siglas en inglés)

2565 CAMINO DEL RIO S STE 201
 SAN DIEGO, CA 92108-3789
Phone: (619) 718-9777
Fax: (619) 569-2855
After Hours Phone: (619) 718-9777
Accepting New Patients: No
Site Language(s) Spoken: Hours: M-SU 8:30AM-4PM
License number:
NPI: 1346455961
Accommodations for those with physical disabilities: W
Public transportation (within 1/2 mile from Site): Yes
American Sign Language (ASL): No
Language Line interpreter services: No
If Facility has completed cultural competence training?: No
Facility has access to skilled medical interpreters on site?: No
Interpreter Non-English Languages: N
Medi-Cal: Y
Special Expertise:
 - *Physical Disabilities?:*
 - *Chronic Illness?:*
 - *HIV/AIDS?:*
 - *Serious Mental Illness?:*
 - *Homelessness?:*
 - *Deaf or Hard-of-Hearing?:*
 - *Blindness or Visual Impairment?:*
 - *Co-occurring Disorders?:*
If any other, please indicate:
Website:
www.lovingcareadhc.com

**NEIGHBORHOOD HOUSE
 ASSOC ADHC**
Provider ID: 417306
 851 S 35TH ST

SAN DIEGO, CA 92113-2701
Phone: (619) 233-6691
Fax: (619) 233-6693
After Hours Phone: (619) 233-6691
Accepting New Patients: No
Site Language(s) Spoken: Spanish
Hours: M-F 8AM-4:30PM, SA 9AM-5PM
License number:
NPI: 1669690921
Accommodations for those with physical disabilities: W
Public transportation (within 1/2 mile from Site): Yes
American Sign Language (ASL): No
Language Line interpreter services: No
If Facility has completed cultural competence training?: No
Facility has access to skilled medical interpreters on site?: No
Interpreter Non-English Languages: N
Medi-Cal: Y
Special Expertise:
 - *Physical Disabilities?:*
 - *Chronic Illness?:*
 - *HIV/AIDS?:*
 - *Serious Mental Illness?:*
 - *Homelessness?:*
 - *Deaf or Hard-of-Hearing?:*
 - *Blindness or Visual Impairment?:*
 - *Co-occurring Disorders?:*
If any other, please indicate:
Website:
www.neighborhoodhouse.org/nh-a-programs/adult-day-health-care-center/

**SAN MARCOS
 AMERICARE ADHC**

Provider ID: 420060
 340 RANCHEROS DR STE 196
 SAN MARCOS, CA 92069-2980
Phone: (760) 682-2424
Fax: (760) 471-5104
After Hours Phone: (760) 682-2424
Accepting New Patients: No
Site Language(s) Spoken: Hours: M-SA 9AM-5PM
License number: 060000832
NPI: 1528271186
Accommodations for those with physical disabilities: W
Public transportation (within 1/2 mile from Site): Yes
American Sign Language (ASL): No
Language Line interpreter services: No
If Facility has completed cultural competence training?: No
Facility has access to skilled medical interpreters on site?: No
Interpreter Non-English Languages: N
Medi-Cal: Y
Special Expertise:
 - *Physical Disabilities?:*
 - *Chronic Illness?:*
 - *HIV/AIDS?:*
 - *Serious Mental Illness?:*
 - *Homelessness?:*
 - *Deaf or Hard-of-Hearing?:*
 - *Blindness or Visual Impairment?:*
 - *Co-occurring Disorders?:*
If any other, please indicate:
Website:
www.americareadhc.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

H. Servicios de Apoyo en el Hogar (IHSS, por sus siglas en inglés) en el condado

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

Provider ID: 94605

AGING & INDEPENDENCE SERVICES

5560 OVERLAND AVE

SAN DIEGO, CA 92123

Phone: (858) 495-5885

Fax: (858) 495-5080

After Hours Phone:

License number: 1710308986

NPI: 1710308986

Site English Spoken: Yes

Site Language(s) Spoken:

Cultural Competency:

Hospital Affiliation:

Medi-Cal Open Panel: Yes

Min/Max Age: None

American Sign Language (ASL):

Please contact provider for Accessibility
information

Hours: M-F 8AM-5PM

Website: [https://www.sandiegocounty.gov/
content/sdc/hhsa/programs/ais/
inhome_supportive_services.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html)

Medical Group(s):

IPA:

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I. Autoridad pública

COUNTY OF SAN DIEGO

IHSS PUBLIC AUTHORITY

401 MILE OF CARS WAY, STE 200

NATIONAL CITY, CA 91950

Phone: (866) 351-7722

After Hours Phone:

Site English Spoken:

Site Language(s) Spoken:

Cultural Competency:

American Sign Language (ASL):

Hours: M-F 8AM-5PM

Website: <https://www.sdihsspa.com/>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ALPINE	ALPINE, CA 91901-1102 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> (619) 320-3347 <i>After Hours Phone:</i> (619) 445-6200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
BARMAK, SHANT, PSY <i>Provider Gender:</i> Male <i>License number:</i> 24998 <i>NPI:</i> 1235408972 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i> MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 1620 ALPINE BLVD ALPINE, CA 91901-1102 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> (619) 320-3347 <i>After Hours Phone:</i> (619) 445-6200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	MANESS, PAULA J , PSY <i>Provider Gender:</i> Female <i>License number:</i> 23787 <i>NPI:</i> 1437312097 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i> MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 1620 ALPINE BLVD ALPINE, CA 91901-1102 <i>Phone:</i> (619) 445-6200 <i>Fax:</i> (619) 320-3347 <i>After Hours Phone:</i> (619) 445-6200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions	MUIR, KATHLEEN G , MFT <i>Provider Gender:</i> Female <i>License number:</i> 52081 <i>NPI:</i> 1093009334 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i> MUIR, KATHLEEN 2165 ARNOLD WAY ALPINE, CA 91901-2157 <i>Phone:</i> (619) 873-7738 <i>Fax:</i> (619) 324-4154 <i>After Hours Phone:</i> (619) 873-7738 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Armenian <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 6PM-9PM, TU,TH 10AM-9PM, F 10AM-1:30PM, SA 10AM-3PM
FRITZ, JENNIFER K , PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY24350 <i>NPI:</i> 1013071497 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i> MOUNTAIN HEALTH AND COMMUNITY SERVICES INC 1620 ALPINE BLVD	WINTER, JEFFERY C , PSY <i>Provider Gender:</i> Male <i>License number:</i> 6795 <i>NPI:</i> 1396904850 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i>	

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J. Directorio de proveedores de salud mental

MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
1620 ALPINE BLVD
ALPINE, CA 91901-1102
Phone: (619) 445-6200
Fax: (619) 320-3347
After Hours Phone: (619) 445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
1620 ALPINE BLVD
ALPINE, CA 91901-1102
Phone: (619) 445-6200
Fax: (619) 320-3347
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BORREGO SPRINGS

MCEVOY, PAMELA T , PSY

Provider Gender: Female
License number: PSY10150
NPI: 1043231715
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT
4343 YAQUI PASS ROAD
BORREGO SPRINGS, CA 92004
Phone: (760) 767-5051
Fax: (760) 767-4552
After Hours Phone: (760) 767-5051
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BONITA

GALLEGOS SKOMAL, MARIA, MFT

Provider Gender: Female
License number: 43149
NPI: 1235294992
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
GALLEGOS SKOMAL, MARIA
4045 BONITA RD STE 107
BONITA, CA 91902-1300
Phone: (619) 843-0242
Fax: (619) 470-4711
After Hours Phone: (619) 843-0242
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

CAMPO

BARMAK, SHANT, PSY

Provider Gender: Male
License number: 24998
NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200

Fax: (619) 478-2267
After Hours Phone: (619)
445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BARMAK, SHANT, PSY

Provider Gender: Male

License number: 24998

NPI: 1235408972

Provider English Spoken: Yes

Provider Language(s) Spoken:

Armenian

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

31115 HIGHWAY 94

CAMPO, CA 91906-3133

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BRIDGEFORD, MARIE L , PSY

Provider Gender: Female

License number: 29716

NPI: 1144623869

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CHAMBERS, NICOLE, PSY

Provider Gender: Female

License number: PSY30966

NPI: 1821297029

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female

License number: PSY24350

NPI: 1013071497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

31115 HIGHWAY 94

CAMPO, CA 91906-3133

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female

License number: PSY24350

NPI: 1013071497

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY

Provider Gender: Female

License number: 23787

NPI: 1437312097

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

31115 HIGHWAY 94

CAMPO, CA 91906-3133

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY

Provider Gender: Female

License number: 23787

NPI: 1437312097

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male

License number: 6795

NPI: 1396904850

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MOUNTAIN HEALTH AND
COMMUNITY SERVICES INC

1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028

Phone: (619) 445-6200

Fax: (619) 478-2267

After Hours Phone: (619)

445-6200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Armenian

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
31115 HIGHWAY 94
CAMPO, CA 91906-3133
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619) 445-6200
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
MOUNTAIN HEALTH AND

COMMUNITY SERVICES INC
1388 BUCKMAN SPRINGS RD
CAMPO, CA 91906-2028
Phone: (619) 445-6200
Fax: (619) 478-2267
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLSBAD

AFONTA, ADAOBI J , NPA

Provider Gender: Female
License number: 95011766
NPI: 1295385581
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
COGNITIVE HEALTH SOLUTIONS INC
2292 FARADAY AVE
CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

AGUILAR, JACQUELINE A , CSW

Provider Gender: Female
License number: 98686
NPI: 1790119931
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
MEMORY CHECK PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

AKANDE, ADERONKE, NPA

Provider Gender: Female
License number: 21597
NPI: 1083980247
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COGNITIVE HEALTH
 SOLUTIONS INC
 2292 FARADAY AVE
 CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
 227-0887
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 9AM-5PM

ALLEN, MARK H , PSY

Provider Gender: Male
License number: 11665
NPI: 1922042886
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 ALLEN, MARK
 1207 CARLSBAD VILLAGE DR
 STE R
 CARLSBAD, CA 92008-1958

Phone: (760) 846-1945
Fax: (760) 434-3557
After Hours Phone: (760)
 846-1945
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: TU,TH 9AM-7PM, F
 12PM-5PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

AMERI, GINA, NPA

Provider Gender: Female
License number: 95014769
NPI: 1750994323
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COGNITIVE HEALTH
 SOLUTIONS INC
 2292 FARADAY AVE
 CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
 227-0887
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 9AM-5PM

ANDERSON, ERIC, PSY

Provider Gender: Male
License number: 28391
NPI: 1063851939
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

ANDRADE, GENEVIEVE, PSY
Provider Gender: Female
License number: 29019
NPI: 1124158027
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

AVILA, FERNANDO M , PSY
Provider Gender: Male
License number: 31410
NPI: 1962783464
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BAHADOR, ALBORZ, PSY
Provider Gender: Male
License number: 27236
NPI: 1659678068
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BARNETT, CHALON, CSW
Provider Gender: Female
License number: 87431

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J. Directorio de proveedores de salud mental

NPI: 1144657537
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (800) 275-3243
 Fax: (760) 444-2211
 After Hours Phone: (800)
 275-3243
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BARRETT, ANN, PSY

Provider Gender: Female
 License number: 28146
 NPI: 1205380706
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520

Phone: (800) 275-3243
 Fax: (760) 444-2211
 After Hours Phone: (800)
 275-3243
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BARRIOS, SANDRA L , CSW

Provider Gender: Female
 License number: 87975
 NPI: 1821632670
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (800) 275-3243
 Fax: (760) 444-2211
 After Hours Phone: (800)
 275-3243
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BARTLETT, SARA P , CSW

Provider Gender: Female
 License number: 25746
 NPI: 1780060574
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
 Phone: (800) 275-3243
 Fax: (760) 444-2211
 After Hours Phone: (800)
 275-3243
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BAUTISTA-SANTANA, YUBITZA, CSW

Provider Gender: Female
License number: 76685
NPI: 1427203744
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BENDER, MARGARET H , CSW

Provider Gender: Female
License number: 101346
NPI: 1326622812
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BENNET, MELANIE, PSY

Provider Gender: Female
License number: 30334
NPI: 1639516602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

BIRDSALL, JENNIFER A , PSY

Provider Gender: Female
License number: 26694
NPI: 1871844084
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

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J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BLUMENSTEIN, ROSALYNE, CSW

Provider Gender: Female

License number: 24228

NPI: 1750675542

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BODILY, APRIL, NPA

Provider Gender: Female

License number: 23389

NPI: 1407288236

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

2292 FARADAY AVE

CARLSBAD, CA 92008-7238

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian, Vietnamese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 9AM-5PM

BOULWARE, DESSIRAE L , PSY

Provider Gender: Female

License number: 28641

NPI: 1376827519

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BRUZAS, JESSICA J , PSY

Provider Gender: Female

License number: 28129

NPI: 1689910010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

BUGAS, JOHN S , PSY

Provider Gender: Male

License number: 10562

NPI: 1811285356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

BURCIAGA, HENRY, MFT

Provider Gender: Male

License number: MFT19940

NPI: 1487785705

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR

STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

BURRELL, TRACEY, PSY

Provider Gender: Female

License number: 16091

NPI: 1811079809

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female

License number: C149845

NPI: 1780625012

Provider English Spoken: Yes

Provider Language(s) Spoken:

Chinese

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR

STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CAMBRONNE, MARIE-ADDLY, MD

Provider Gender: Female
License number: C171240
NPI: 1639372543
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CARROLL, MICHAEL C , PSY

Provider Gender: Male
License number: 24334
NPI: 1578731303
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CASPI, HEN, PSY

Provider Gender: Female
License number: 32520
NPI: 1568844207
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1295 CARLSBAD VILLAGE DR STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

CHANG, GRACE, PSY

Provider Gender: Female

License number: 31147

NPI: 1871074997

Provider English Spoken: Yes

Provider Language(s) Spoken:
Korean

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male

License number: 22852

NPI: 1790122638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CHEN, SHARON, PSY

Provider Gender: Female

License number: 21946

NPI: 1376674036

Provider English Spoken: Yes

Provider Language(s) Spoken:

Mandarin

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female

License number: 102353

NPI: 1093225823

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female

License number: 22278

NPI: 1952316648

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

COSTELLO, MARIELA M , PSY

Provider Gender: Female

License number: 23277

NPI: 1801145727

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

DAIMS, RICHARD, PSY

Provider Gender: Male

License number: 11929

NPI: 1992814701

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

DALE, MARIAN, PSY

Provider Gender: Female

License number: 18257

NPI: 1821370941

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

DAVIS, REDD E , CSW

Provider Gender: Female

License number: 99230

NPI: 1629418710

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

DOWNEY, MEGHAN M , PSY

Provider Gender: Female

License number: 30788

NPI: 1467910901

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

DOYLE, TERI L , PSY

Provider Gender: Female

License number: 19065

NPI: 1568003820

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

DUALE, FAIZA M , PSY

Provider Gender: Female

License number: 30188

NPI: 1497154751

Provider English Spoken: Yes

Provider Language(s) Spoken:

Somali

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

DUVVURI, VIKAS, MD

Provider Gender: Male
License number: A99706
NPI: 1255470480
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi, Telugu
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

ETTELSON, RICHARD, PSY

Provider Gender: Male
License number: 18953
NPI: 1174569453
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FERRARO, PIA, NPA

Provider Gender: Female
License number: 766694
NPI: 1700203361
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
2292 FARADAY AVE
CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
227-0887

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-5PM

FISHER, MELISSA A , NPA

Provider Gender: Female
License number: 620421
NPI: 1316108616
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FLEISHMAN, SCOTT A , PSY

Provider Gender: Male
License number: 18011
NPI: 1942411343
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FLYNN (NEWMAN), DANIELLE I , PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

FOSTER, RHYAN N , PSY

Provider Gender: Female
License number: PSY30106
NPI: 1447617519
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FOWLER, BROCK L , PSY

Provider Gender: Male
License number: 20528
NPI: 1841408127
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FRANCE, SHADAVIA C , PSY

Provider Gender: Female
License number: 31452
NPI: 1003122854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GENGENBACHER, MARIA A , PSY

Provider Gender: Female
License number: 21014
NPI: 1508098021
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GERAGHTY, MICHAEL E , PSY

Provider Gender: Male
License number: 30600
NPI: 1114491545
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
License number: 25138
NPI: 1063800217
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GHEYTANCHI, ANAHITA, PSY

Provider Gender: Female
License number: 25467
NPI: 1538466800
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GIRALDO, FIORELLA P , CSW

Provider Gender: Female

License number: 13315

NPI: 1932235611

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FIORELLA GIRALDO

8019 PASEO ALISO

CARLSBAD, CA 92009-9026

Phone: (760) 519-5409

Fax: (760) 635-0852

After Hours Phone: (760)

519-5409

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: TU,TH 9AM-5PM, W
9AM-12PM

GIVEN, JEANNETTE E , PSY

Provider Gender: Female

License number: 12040

NPI: 1952529422

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GLOOR MAUNG, PRISCA, PSY

Provider Gender: Female

License number: 21864

NPI: 1699809251

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

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Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

GONZALEZ, JOSE, CSW

Provider Gender: Male

License number: 80920

NPI: 1689844847

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR

STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

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J. Directorio de proveedores de salud mental

GOREWITZ, JANET F , PSY

Provider Gender: Female

License number: 12213

NPI: 1952742306

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female

License number: 63746

NPI: 1578835757

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

1295 CARLSBAD VILLAGE DR
STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

HALL, KIMBERLY A , PSY

Provider Gender: Female

License number: PSY19448

NPI: 1730232356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

HANSEN, JULIE H , CSW

Provider Gender: Female

License number: 23641

NPI: 1366576886

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

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J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

HARRIS, CATHERINE G , PSY

Provider Gender: Female

License number: 22197

NPI: 1871743880

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

HARRIS, SUSAN A , MD

Provider Gender: Female

License number: C50886

NPI: 1982700365

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

HEICKLEN, OKSANA, MFT

Provider Gender: Female

License number: 43656

NPI: 1093938664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

HEICKLEN, OKSANA

2564 STATE ST STE B

CARLSBAD, CA 92008-1662

Phone: (760) 805-4740

Fax: (760) 407-6099

After Hours Phone: (760)

805-4740

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-F 10AM-8PM

HIRSCH, NORMA J , PSY

Provider Gender: Female

License number: 15140

NPI: 1073706982

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

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J. Directorio de proveedores de salud mental

HOANG, HANNAH, CSW

Provider Gender: Female
License number: LCSW95198
NPI: 1760615348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COGNITIVE HEALTH
 SOLUTIONS INC
 2292 FARADAY AVE
 CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
 227-0887
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 9AM-5PM

HOOKE, TERESA J , PSY

Provider Gender: Female
License number: 30780
NPI: 1750586731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520

Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

HURST, SUSAN I , PSY

Provider Gender: Female
License number: 14337
NPI: 1336157379
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

IZBICKI, KRISTEN, PSY

Provider Gender: Female
License number: 28924
NPI: 1528327350
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

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J. Directorio de proveedores de salud mental

JARAMILLO, CARLA, PSY

Provider Gender: Female
License number: 27512
NPI: 1689823627
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES

1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

JONES, ALYCIA S , CSW

Provider Gender: Female
License number: 94372
NPI: 1942815550
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

JOUDY, RAEDA S , PSY

Provider Gender: Female
License number: 28972
NPI: 1295925501
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Arabic
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-5PM

KANG, DIANA C , PSY

Provider Gender: Female

License number: 27101

NPI: 1215016985

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

KEATS, LAUREN B , PSY

Provider Gender: Female

License number: 29411

NPI: 1356699342

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

KELSON, MONICA B , PSY

Provider Gender: Female

License number: 13224

NPI: 1922184803

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

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Fax: (760) 444-2211

After Hours Phone: (800)

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

KHALITCHI, MARJANEH, PSY

Provider Gender: Female

License number: 32068

NPI: 1558962324

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

KLIGER, JARED C , PSY

Provider Gender: Male

License number: 22666

NPI: 1477787802

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

KOGOUT, OXANA A , NPA

Provider Gender: Female

License number: 95004052

NPI: 1477910214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

2292 FARADAY AVE

CARLSBAD, CA 92008-7238

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian, Vietnamese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 9AM-5PM

KOOZEKANANI, ROSHAN S , MD

Provider Gender: Female

License number: C 171720

NPI: 1407878515

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

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After Hours Phone: (800)

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

KRAETZ, FRANK A , PSY

Provider Gender: Male

License number: 30944

NPI: 1366787764

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

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After Hours Phone: (800)

275-3243

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KRUEGER, BONNIE, PSY

Provider Gender: Female
License number: 16400
NPI: 1144425935
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

KU, WENDY, PSY

Provider Gender: Female
License number: 24640
NPI: 1932242716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

LEAKE, MADELEINE, PSY

Provider Gender: Female
License number: 29896
NPI: 1336640226
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

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J. Directorio de proveedores de salud mental

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

LI, TORNA, PSY

Provider Gender: Female

License number: 25938

NPI: 1154579431

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

LOPEZ, FREDERICK, PSY

Provider Gender: Male

License number: 32140

NPI: 1669671699

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

LYNN, BRIAN W , PSY

Provider Gender: Male

License number: 19295

NPI: 1972046423

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F

8AM-5PM

MACKIE, MICHAEL W , PSY

Provider Gender: Male

License number: 30000

NPI: 1851881379

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MAKAIPO, JANELLE, MFT

Provider Gender: Female
License number: 44159
NPI: 1114450640
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
2292 FARADAY AVE
CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
227-0887
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian, Vietnamese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-5PM

MANN, PAVANINDER S , PSY

Provider Gender: Male
License number: 18296
NPI: 1306931167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Panjabi, Punjabi
Cultural Competency:
MEMORY CHECK

PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211

After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MARTINEZ, OLGA G , PSY

Provider Gender: Female
License number: PSY21924
NPI: 1801939731
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MASSIMINO, ASHLEY A , PSY

Provider Gender: Female
License number: 23992
NPI: 1619161569
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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275-3243
Website:
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Accepting New Patients: Yes
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Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MCKOWN, JULIE, NPA

Provider Gender: Female
License number: 95010619
NPI: 1205393964
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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275-3243
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Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MEISENHEIMER, DANIEL, CSW

Provider Gender: Male
License number: 74848
NPI: 1073875548
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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275-3243
Website:

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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MELE, ANTHONY J , PSY

Provider Gender: Male
License number: 30995
NPI: 1619021599
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
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Fax: (760) 444-2211
After Hours Phone: (800)
275-3243

Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

MELVILLE, TAYLOR, PSY

Provider Gender: Female
License number: PSY30319
NPI: 1518480730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
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Amharic, Arabic, Mandarin,
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Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM	<i>NPI:</i> 1518335017 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 <i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM	<i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM
MENDONSA, ANDREW D , PSY <i>Provider Gender:</i> Male <i>License number:</i> 23208 <i>NPI:</i> 1760530117 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 <i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM	METELLUS, JENNA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30486 <i>NPI:</i> 1891043865 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520	MISCHKA, MELISSA F , PSY <i>Provider Gender:</i> Female <i>License number:</i> 28982 <i>NPI:</i> 1730496183 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 <i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi,
MESGARHA, EIMA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29797		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

MOENCH, PAUL, PSY

Provider Gender: Male

License number: 18012

NPI: 1033430889

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869

NPI: 1396047809

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

1295 CARLSBAD VILLAGE DR STE 100

CARLSBAD, CA 92008-1950

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MOON, MALLORY L , PSY

Provider Gender: Female

License number: 31108

NPI: 1205496932

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800) 275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

NEVITT, JENNIFER A , PSY

Provider Gender: Female

License number: 15338

NPI: 1790267292

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin, German, Farsi, French, Hindi,

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J. Directorio de proveedores de salud mental

Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

NGUYEN, CHINH, CSW

Provider Gender: Female
License number: 63687
NPI: 1679717045
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: COGNITIVE HEALTH SOLUTIONS INC
2292 FARADAY AVE
CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian, Vietnamese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

NGUYEN, LILI K , PSY

Provider Gender: Female
License number: 28728
NPI: 1881967123
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

OBI, RACHAEL I , NRS

Provider Gender: Female
License number: 95011263
NPI: 1760940001
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520

Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

OKORONKWO, NNENNAYA, NPA

Provider Gender: Female
License number: 95010504
NPI: 1710458096
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800) 275-3243
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Amharic, Arabic, Mandarin,

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J. Directorio de proveedores de salud mental

German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

OVERIN, FORREST M , MFT

Provider Gender: Male
License number: 20617
NPI: 1952459398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FORREST M OVERIN, LMFT
2945 HARDING ST STE 105
CARLSBAD, CA 92008-1818
Phone: (760) 434-1941
Fax: (760) 433-1941
After Hours Phone: (760)
434-1941
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: W,F 10AM-6PM, SA
8AM-2PM

PARK, RUSSELL D , PSY

Provider Gender: Male

License number: 14275
NPI: 1326020710
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

PEER, LORNA K , PSY

Provider Gender: Female
License number: 23958
NPI: 1922260561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520

Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

PHAM, LOAN V , NPA

Provider Gender: Female
License number: 16368
NPI: 1053440065
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Korean, Panjabi, Punjabi TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM RAMIREZ, RANDALL A , CSW Provider Gender: Male License number: 9206 NPI: 1023120318 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (800) 275-3243 Fax: (760) 444-2211 After Hours Phone: (800) 275-3243 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM	8AM-5PM REED, JASMINE, PSY Provider Gender: Female License number: 30592 NPI: 1871814830 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (800) 275-3243 Fax: (760) 444-2211 After Hours Phone: (800) 275-3243 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM REININGA, ERIC J , PSY Provider Gender: Male License number: 18803 NPI: 1710146816 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES	5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (800) 275-3243 Fax: (760) 444-2211 After Hours Phone: (800) 275-3243 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: SA,SU 7AM-7PM, M-F 8AM-5PM RIZZUTO, CORY, PSY Provider Gender: Male License number: 28117 NPI: 1083995930 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 Phone: (800) 275-3243 Fax: (760) 444-2211 After Hours Phone: (800) 275-3243 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:
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J. Directorio de proveedores de salud mental

Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

ROBINSON, PICOLYA K , PSY

Provider Gender: Female
License number: 30796
NPI: 1699977934
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

ROSENBLUM-FISHMAN, SARA, PSY

Provider Gender: Female
License number: 29104
NPI: 1982860706
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SAID, SARA, PSY

Provider Gender: Female
License number: 22653
NPI: 1174654149
Provider English Spoken: Yes
Provider Language(s) Spoken:
Amharic, Tigrinya

Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SAMUELS, DEANNE, PSY

Provider Gender: Female
License number: PSY18392
NPI: 1144859836
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SANCHEZ, JULIE, PSY

Provider Gender: Female

License number: 31013

NPI: 1013165836

Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SCAGLIONE, CRIS, PSY

Provider Gender: Female

License number: 30718

NPI: 1770732927

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):

No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SELDEN, CATHERINE, PSY

Provider Gender: Female

License number: 15943

NPI: 1134636764

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Amharic, Arabic, Mandarin,

German, Farsi, French, Hindi,

Korean, Panjabi, Punjabi

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):

No

Please contact provider for
 Accessibility information

Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SHIRINIAN, MOSES S , PSY

Provider Gender: Male

License number: 23194

NPI: 1477902864

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MEMORY CHECK

PSYCHOLOGICAL SERVICES

5838 EDISON PL STE 100

CARLSBAD, CA 92008-5520

Phone: (800) 275-3243

Fax: (760) 444-2211

After Hours Phone: (800)

275-3243

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SIMMONS, LILIANA C , NPA
Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA
Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY
Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SMITH, MARYAM, PSY
Provider Gender: Female
License number: 27252
NPI: 1396916169
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SONG, NATALIE, NPA

Provider Gender: Female
License number: 95011618
NPI: 1790207215
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SOUTH, LARA L , PSY

Provider Gender: Female
License number: 31523
NPI: 1851652655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

SPEARS, KENNETH B , PSY

Provider Gender: Male
License number: 29427
NPI: 1700390366
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

STAEFFLER, IMME, PSY

Provider Gender: Female
License number: 29936
NPI: 1558875351
Provider English Spoken: Yes
Provider Language(s) Spoken:
German
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

STARK, ROHN, PSY

Provider Gender: Male
License number: 26386
NPI: 1902219850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SUEN, TIFFANY R , PSY

Provider Gender: Female
License number: 31554
NPI: 1609152537
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Mandarin
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

SWISTUN, DOMINIKA, PSY

Provider Gender: Female
License number: 30984
NPI: 1669875373

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

TABISH, RAINIE, PSY

Provider Gender: Female
License number: 28333
NPI: 1134367832
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK
 PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243

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J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male
License number: 13309
NPI: 1720265614
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1295 CARLSBAD VILLAGE DR
STE 100
CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TRUONG, DONNA, PSY

Provider Gender: Female
License number: 30689
NPI: 1972798098
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Amharic, Arabic, Mandarin,
German, Farsi, French, Hindi,
Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: SA,SU 7AM-7PM, M-F
8AM-5PM

TYLER, CAROL P , PSY

Provider Gender: Female
License number: 23922
NPI: 1902842370
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MEMORY CHECK
PSYCHOLOGICAL SERVICES
5838 EDISON PL STE 100
CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
275-3243
Website:
www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female
License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 1295 CARLSBAD VILLAGE DR
 STE 100
 CARLSBAD, CA 92008-1950
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

WARD MCKINLAY, THOMAS, PSY

Provider Gender: Male
License number: 7065
NPI: 1346778081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MEMORY CHECK

PSYCHOLOGICAL SERVICES
 5838 EDISON PL STE 100
 CARLSBAD, CA 92008-5520
Phone: (800) 275-3243
Fax: (760) 444-2211
After Hours Phone: (800)
 275-3243
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Amharic, Arabic, Mandarin,
 German, Farsi, French, Hindi,
 Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: SA,SU 7AM-7PM, M-F
 8AM-5PM

WARD, ELIZABETH T , MFT

Provider Gender: Female
License number: 29328
NPI: 1487689725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COGNITIVE HEALTH
 SOLUTIONS INC
 2292 FARADAY AVE
 CARLSBAD, CA 92008-7238
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858)
 227-0887
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> Russian, Vietnamese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-5PM WELCH, MEGAN, MFT <i>Provider Gender:</i> Female <i>License number:</i> 113763 <i>NPI:</i> 1689117400 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008-1950 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 720-7204 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM YANEZ-CRUZ, EVETTE, PSY	<i>Provider Gender:</i> Female <i>License number:</i> 23985 <i>NPI:</i> 1104969427 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 <i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM ZALEWSKI ZARAGOZA, ROBERT A , MD <i>Provider Gender:</i> Male <i>License number:</i> A85005 <i>NPI:</i> 1720054133 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520	<i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi, Korean, Panjabi, Punjabi <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> SA,SU 7AM-7PM, M-F 8AM-5PM ZANOLINI, SHANNA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 22836 <i>NPI:</i> 1194038265 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> MEMORY CHECK PSYCHOLOGICAL SERVICES 5838 EDISON PL STE 100 CARLSBAD, CA 92008-5520 <i>Phone:</i> (800) 275-3243 <i>Fax:</i> (760) 444-2211 <i>After Hours Phone:</i> (800) 275-3243 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Amharic, Arabic, Mandarin, German, Farsi, French, Hindi,
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Korean, Panjabi, Punjabi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: SA,SU 7AM-7PM, M-F 8AM-5PM

CHULA VISTA

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:
AGUAYO, SILVIA R , MFT
Provider Gender: Female
License number: 45814
NPI: 1982927059
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: AGUAYO, SILVIA
 229 F ST STE A
 CHULA VISTA, CA 91910-2822
Phone: (619) 454-0055
Fax: (619) 432-0045
After Hours Phone: (619) 454-0055
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-8:30PM, SA 9AM-12PM	9AM-4:15PM, F 8:30AM-12:30PM	248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU	AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	AGUIRRE, WENDY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 74219 <i>NPI:</i> 1205946282 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes
AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes	AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

AGUIRRE, WENDY, CSW

Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AIDAR-CURRIER, RENATA, CSW

Provider Gender: Female
License number: LCSW26063
NPI: 1932277597

Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
AIDAR-CURRIER, RENATA
625 THIRD AVE
CHULA VISTA, CA 91910-5703
Phone: (619) 804-6918
Fax: (619) 476-7566
After Hours Phone: (619)
804-6918
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 1PM-7PM, TU
3PM-8PM, W 10AM-8PM, SA
9AM-1PM

ALAVI, ALI S , MD

Provider Gender: Male
License number: A163793
NPI: 1356856694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

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J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: ALFARO, AMY, CSW Provider Gender: Female License number: 72874 NPI: 1609326859 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	NPI: 1609326859 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
ALAVI, ALI S , MD Provider Gender: Male License number: A163793 NPI: 1356856694 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	ALTERS, DENNIS, MD Provider Gender: Male License number: G36206 NPI: 1457371635 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609
ALFARO, AMY, CSW Provider Gender: Female License number: 72874	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD
 Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

ALTERS, DENNIS, MD
 Provider Gender: Male
 License number: G36206
 NPI: 1457371635
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

ARAGON, DARINKA M , MD

Provider Gender: Female

License number: A139241

NPI: 1114347291

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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J. Directorio de proveedores de salud mental

248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
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Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Hours:

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BANZON, CHARLES, MFT

Provider Gender: Male
License number: 49126
NPI: 1457422966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

BANZON, CHARLES, MFT

Provider Gender: Male
License number: 49126
NPI: 1457422966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com	Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM BENZL, JERRY F , MD Provider Gender: Male License number: A154471 NPI: 1487032082 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BENZL, JERRY F , MD

Provider Gender: Male
License number: A154471
NPI: 1487032082
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
BORREGO, DIANA E , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609	BROWN, CRAIG A , MD <i>Provider Gender:</i> Male <i>License number:</i> G28188 <i>NPI:</i> 1730239989 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> BROWN, CRAIG 480 FOURTH AVE STE 511 CHULA VISTA, CA 91910-4414 <i>Phone:</i> (619) 426-0370 <i>Fax:</i> (619) 426-0676 <i>After Hours Phone:</i> (619) 426-0370 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender
BORREGO, DIANA E , NPA	BORREGO, DIANA E , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005019 <i>NPI:</i> 1184012866 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions	NPI: 1093747511	Phone: (619) 515-2338
American Sign Language (ASL):	Provider English Spoken: Yes	Fax: (619) 702-8536
No	Provider Language(s) Spoken:	After Hours Phone: (619)
Please contact provider for	Spanish	515-2338
Accessibility information	Cultural Competency:	Website:
Hours: M-TH 10AM-7PM	FAMILY HEALTH CENTERS OF	www.beaconhealthoptions.com
	SAN DIEGO	Accepting New Patients: Yes
BUBY, MYRA, CSW	352 L ST	Site English Spoken: Yes
Provider Gender: Female	CHULA VISTA, CA 91911-1208	Site Language(s) Spoken:
License number: 23172	Phone: (619) 515-2338	American Sign Language, Farsi,
NPI: 1093747511	Fax: (619) 702-8536	Portuguese, Russian, Spanish,
Provider English Spoken: Yes	After Hours Phone: (619)	Yue Chinese
Provider Language(s) Spoken:	515-2338	TDD: No
Spanish	Website:	Min/Max Age:
Cultural Competency:	www.beaconhealthoptions.com	Gender Restriction: No Gender
FAMILY HEALTH CENTERS OF	Accepting New Patients: Yes	Restrictions
SAN DIEGO	Site English Spoken: Yes	American Sign Language (ASL):
248 LANDIS AVE	Site Language(s) Spoken:	Yes
CHULA VISTA, CA 91910-2609	American Sign Language, Farsi,	Please contact provider for
Phone: (619) 515-2338	Japanese, Portuguese, Russian,	Accessibility information
Fax: (619) 702-8536	Spanish, Yue Chinese	Hours:
After Hours Phone: (619)	TDD: No	
515-2338	Min/Max Age:	BUI, ANTHONY, MD
Website:	Gender Restriction: No Gender	Provider Gender: Male
www.beaconhealthoptions.com	Restrictions	License number: A146965
Accepting New Patients: Yes	American Sign Language (ASL):	NPI: 1346628880
Site English Spoken: Yes	Yes	Provider English Spoken: Yes
Site Language(s) Spoken:	Please contact provider for	Provider Language(s) Spoken:
American Sign Language, Farsi,	Accessibility information	Vietnamese
Japanese, Portuguese, Russian,	Hours: M 8:30AM-5PM, TU	Cultural Competency:
Spanish, Vietnamese, Yue	9AM-4:15PM, F	FAMILY HEALTH CENTERS OF
Chinese	8:30AM-12:30PM	SAN DIEGO
TDD: No		248 LANDIS AVE
Min/Max Age: 0/99	BUBY, MYRA, CSW	CHULA VISTA, CA 91910-2609
Gender Restriction: No Gender	Provider Gender: Female	Phone: (619) 515-2338
Restrictions	License number: 23172	Fax: (619) 702-8536
American Sign Language (ASL):	NPI: 1093747511	After Hours Phone: (619)
Yes	Provider English Spoken: Yes	515-2338
Please contact provider for	Provider Language(s) Spoken:	Website:
Accessibility information	Spanish	www.beaconhealthoptions.com
Hours: M-F 8:30AM-5PM	Cultural Competency:	Accepting New Patients: Yes
	FAMILY HEALTH CENTERS OF	Site English Spoken: Yes
BUBY, MYRA, CSW	SAN DIEGO	Site Language(s) Spoken:
Provider Gender: Female	251 LANDIS AVE	American Sign Language, Farsi,
License number: 23172	CHULA VISTA, CA 91910-2628	Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours:

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

BURNS, PETER B , MD

Provider Gender: Male

License number: G145142

NPI: 1891727533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

BURNS, PETER B , MD

Provider Gender: Male

License number: G145142

NPI: 1891727533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female

License number: 65477

NPI: 1346615838

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	Provider Gender: Male License number: A137940 NPI: 1811212145 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
CABREJOS, CLAUDIO, MD Provider Gender: Male License number: A71653 NPI: 1033133483 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	CABREJOS, CLAUDIO, MD Provider Gender: Male License number: A71653 NPI: 1033133483 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	CARDENAS, ALONSO, MD Provider Gender: Male License number: A137940 NPI: 1811212145 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628
CABREJOS, CLAUDIO, MD Provider Gender: Male License number: A71653 NPI: 1033133483 Provider English Spoken: Yes Provider Language(s) Spoken: Portuguese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No	CARDENAS, ALONSO, MD	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
License number: 82782
NPI: 1598165441
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
 License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

CHEN, ANGELA, MFT

Provider Gender: Female
 License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
 License number: 69616
 NPI: 1922313394
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CLONTS, PAUL A , CSW

Provider Gender: Male
License number: 87259
NPI: 1467808568
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

CLONTS, PAUL A , CSW

Provider Gender: Male
License number: 87259
NPI: 1467808568
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female
License number: A160789
NPI: 1124401435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

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J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female
License number: A160789
NPI: 1124401435
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM DAN, WENDY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 26015 <i>NPI:</i> 1700224037 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> DAN, WENDY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 26015	<i>NPI:</i> 1700224037 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM DAN, WENDY L , CSW <i>Provider Gender:</i> Female <i>License number:</i> 26015 <i>NPI:</i> 1700224037 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM DE LLANO, CARMEN, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY11154 <i>NPI:</i> 1992752406 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> DR. CARMEN DE LLANO, PH.D. 815 THIRD AVE STE 107 CHULA VISTA, CA 91911-1308 <i>Phone:</i> (619) 584-6299 <i>Fax:</i> <i>After Hours Phone:</i> (619) 584-6299 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	NPI: 1144726415 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
DEBBOLD, ERIC M , MD Provider Gender: Male License number: 164068 NPI: 1144726415 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	DEBBOLD, ERIC M , MD Provider Gender: Male License number: 164068	DIAZ, LIZETH, CSW Provider Gender: Female License number: 97277 NPI: 1124457023 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

DOBOS, DAVID, MD

Provider Gender: Male

License number: G57276

NPI: 1548318348

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	9AM-4:15PM, F 8:30AM-12:30PM DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

DWYER, GEORGE, CSW

Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

FERRER, ADAREZZA I, MD

Provider Gender: Female

License number: A123390

NPI: 1316175524

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

835 THIRD AVE

CHULA VISTA, CA 91911-1352

Phone: (619) 427-4661

Fax: (619) 426-7849

After Hours Phone: (619)

427-4661

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi, Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M 9AM-8PM, TU,W,F

9AM-5PM, TH 12PM-8PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FLYNN CRUZ, MARY E , CSW

Provider Gender: Female

License number: 92918

NPI: 1942814181

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FLYNN CRUZ, MARY E , CSW

Provider Gender: Female

License number: 92918

NPI: 1942814181

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female
 License number: 16284
 NPI: 1588795298
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female
License number: 16284
NPI: 1588795298
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

FUENTES WEST, MARYSOL, MFT

Provider Gender: Female
License number: 39962
NPI: 1285770941
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FUENTES WEST, MARYSOL
 815 THIRD AVE STE 107
 CHULA VISTA, CA 91911-1308
Phone: (619) 422-7216
Fax: (619) 426-1906
After Hours Phone: (619) 422-7216
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: Yes
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY
 Provider Gender: Female
 License number: 16711
 NPI: 1174646301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GALAPON, DIXIE L , PSY
 Provider Gender: Female
 License number: 16711
 NPI: 1174646301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GAUD, KRISTINA G , MD
 Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

GAUD, KRISTINA G , MD
 Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GAUD, KRISTINA G , MD
 Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GILLIS, RUTH, MFT
Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GILLIS, RUTH, MFT
Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GLEASON, SHEILA, PSY

Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

GUTIERREZ, APRIL P , CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,

Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HAYDEN WADE, HELEN, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY19313 <i>NPI:</i> 1366951105 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>
HEDMAN, TERI LEE, CSW <i>Provider Gender:</i> U <i>License number:</i> 74947 <i>NPI:</i> 1154811636 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	HEDMAN, TERI LEE, CSW <i>Provider Gender:</i> U <i>License number:</i> 74947 <i>NPI:</i> 1154811636 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU	HEDMAN, TERI LEE, CSW <i>Provider Gender:</i> U <i>License number:</i> 74947 <i>NPI:</i> 1154811636 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

9AM-4:15PM, F
8:30AM-12:30PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

HUDSON, KATE, CSW

Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

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J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM JACKSON, TIENNA S , CSW <i>Provider Gender:</i> Female <i>License number:</i> 89122 <i>NPI:</i> 1194976225 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> JACKSON, TIENNA S , CSW <i>Provider Gender:</i> Female <i>License number:</i> 89122 <i>NPI:</i> 1194976225 <i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM JALAN, DEVESH, MD <i>Provider Gender:</i> Male <i>License number:</i> A167754 <i>NPI:</i> 1083092134 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM JALAN, DEVESH, MD <i>Provider Gender:</i> Male <i>License number:</i> A167754 <i>NPI:</i> 1083092134 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931

NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	9AM-4:15PM, F 8:30AM-12:30PM JAUREGUI, CYNTHIA J , MFT Provider Gender: Female License number: 46152 NPI: 1003953886 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
JASSO-RAMIREZ, MARTHA, CSW Provider Gender: Female License number: 26493 NPI: 1871772020 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU	JAUREGUI, CYNTHIA J , MFT Provider Gender: Female License number: 46152 NPI: 1003953886 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish	JONES, ADELE, PSY Provider Gender: Female License number: 25311 NPI: 1558602490 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours:
JONES, ADELE, PSY
Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

JONES, MICHAEL A , CSW
Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
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Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

KEI, JUSTIN, MD
Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
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 515-2338
Website:
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
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Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM
KEI, JUSTIN, MD
Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
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Fax: (619) 702-8536
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 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours:
KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
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Accepting New Patients: Yes
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
 NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
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Fax: (619) 702-8536
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

**KLOBERDANZ, KELSEY L ,
 NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM KLOBERDANZ, KELSEY L , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese	<i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM KNIGHT, MARK ANTHONY, MD <i>Provider Gender:</i> Male <i>License number:</i> A94460 <i>NPI:</i> 1851573554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM KNIGHT, MARK ANTHONY, MD	<i>Provider Gender:</i> Male <i>License number:</i> A94460 <i>NPI:</i> 1851573554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM KNIGHT, MARK ANTHONY, MD <i>Provider Gender:</i> Male <i>License number:</i> A94460 <i>NPI:</i> 1851573554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

KOH, STEVE H , MD

Provider Gender: Male
 License number: A103468
 NPI: 1467650473
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue

Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
 License number: PSY20233
 NPI: 1174964399
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

KRITTMAN, STUART W , PSY

Provider Gender: Male
 License number: PSY20233
 NPI: 1174964399
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555

NPI: 1174981500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555

NPI: 1174981500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

LEBLANC, ASHLEY B , CSW

Provider Gender: Female

License number: 83136

NPI: 1275905622

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

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After Hours Phone: (619)

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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J. Directorio de proveedores de salud mental

251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
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After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
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American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIDSTONE, PAVEN, MD
Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

LIDSTONE, PAVEN, MD
Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD
Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIM, SANDRA S , MD
Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F
8:30AM-12:30PM

LIPPERT, HEATHER M , CSW
Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LLAMAS, SASHA G , CSW
Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

LLAMAS, SASHA G , CSW
Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
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Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours:
LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

LOEB, CINDY, CSW
Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
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Accepting New Patients: Yes
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

LYONS, KEITH E , CSW
Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST
CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours:

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
MACMASTER, LINDSAY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25570 <i>NPI:</i> 1659520179 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com	MAHONEY, PATRICIA A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 22296 <i>NPI:</i> 1700200888 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	MAIETTA, KATHLEEN H , CSW <i>Provider Gender:</i> Female <i>License number:</i> 88399 <i>NPI:</i> 1487128617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
	MALAK, LAWRENCE, MD <i>Provider Gender:</i> Male <i>License number:</i> A115345	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MALAK, LAWRENCE, MD
Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTINEZ, IVONNE B , CSW
Provider Gender: Female
License number: 85604
NPI: 1225355498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MARTINEZ, IVONNE B , CSW
Provider Gender: Female
License number: 85604
NPI: 1225355498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTINEZ, STEPHANIE, MD
Provider Gender: Female
License number: 152787
NPI: 1699126367

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTINEZ, STEPHANIE, MD
Provider Gender: Female
License number: 152787
NPI: 1699126367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MARTIR, MICHEL, CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information

Hours:

MCGINLEY, NANCY R , MD

Provider Gender: Female

License number: A167231

NPI: 1649765124

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MCGINLEY, NANCY R , MD

Provider Gender: Female

License number: A167231

NPI: 1649765124

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours:

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

MEJIA, RITA I, MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

MEJIA, RITA I, MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MEJIA, RITA I, MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

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J. Directorio de proveedores de salud mental

Restrictions	<i>License number:</i> 89151	<i>Phone:</i> (619) 515-2338
<i>American Sign Language (ASL):</i>	<i>NPI:</i> 1356902795	<i>Fax:</i> (619) 702-8536
Yes	<i>Provider English Spoken:</i> Yes	<i>After Hours Phone:</i> (619)
Please contact provider for	<i>Provider Language(s) Spoken:</i>	515-2338
Accessibility information	<i>Cultural Competency:</i>	<i>Website:</i>
<i>Hours:</i> M-F 8:30AM-5PM	FAMILY HEALTH CENTERS OF	www.beaconhealthoptions.com
	SAN DIEGO	<i>Accepting New Patients:</i> Yes
MENDEZ PEREZ, MARIA C ,	251 LANDIS AVE	<i>Site English Spoken:</i> Yes
CSW	CHULA VISTA, CA 91910-2628	<i>Site Language(s) Spoken:</i>
<i>Provider Gender:</i> Female	<i>Phone:</i> (619) 515-2338	American Sign Language, Farsi,
<i>License number:</i> 89151	<i>Fax:</i> (619) 702-8536	Japanese, Portuguese, Russian,
<i>NPI:</i> 1356902795	<i>After Hours Phone:</i> (619)	Spanish, Yue Chinese
<i>Provider English Spoken:</i> Yes	515-2338	<i>TDD:</i> No
<i>Provider Language(s) Spoken:</i>	<i>Website:</i>	<i>Min/Max Age:</i>
<i>Cultural Competency:</i>	www.beaconhealthoptions.com	<i>Gender Restriction:</i> No Gender
FAMILY HEALTH CENTERS OF	<i>Accepting New Patients:</i> Yes	Restrictions
SAN DIEGO	<i>Site English Spoken:</i> Yes	<i>American Sign Language (ASL):</i>
248 LANDIS AVE	<i>Site Language(s) Spoken:</i>	Yes
CHULA VISTA, CA 91910-2609	American Sign Language, Farsi,	Please contact provider for
<i>Phone:</i> (619) 515-2338	Portuguese, Russian, Spanish,	Accessibility information
<i>Fax:</i> (619) 702-8536	Yue Chinese	<i>Hours:</i> M 8:30AM-5PM, TU
<i>After Hours Phone:</i> (619)	<i>TDD:</i> No	9AM-4:15PM, F
515-2338	<i>Min/Max Age:</i>	8:30AM-12:30PM
<i>Website:</i>	<i>Gender Restriction:</i> No Gender	
www.beaconhealthoptions.com	Restrictions	MERRILL, SARAH M , CSW
<i>Accepting New Patients:</i> Yes	<i>American Sign Language (ASL):</i>	<i>Provider Gender:</i> Female
<i>Site English Spoken:</i> Yes	Yes	<i>License number:</i> 79014
<i>Site Language(s) Spoken:</i>	Please contact provider for	<i>NPI:</i> 1639403884
American Sign Language, Farsi,	Accessibility information	<i>Provider English Spoken:</i> Yes
Japanese, Portuguese, Russian,	<i>Hours:</i>	<i>Provider Language(s) Spoken:</i>
Spanish, Vietnamese, Yue		<i>Cultural Competency:</i>
Chinese	MENDEZ, ANDRES G , PSY	FAMILY HEALTH CENTERS OF
<i>TDD:</i> No	<i>Provider Gender:</i> Male	SAN DIEGO
<i>Min/Max Age:</i> 0/99	<i>License number:</i> 28907	248 LANDIS AVE
<i>Gender Restriction:</i> No Gender	<i>NPI:</i> 1841482692	CHULA VISTA, CA 91910-2609
Restrictions	<i>Provider English Spoken:</i> Yes	<i>Phone:</i> (619) 515-2338
<i>American Sign Language (ASL):</i>	<i>Provider Language(s) Spoken:</i>	<i>Fax:</i> (619) 702-8536
Yes	<i>Cultural Competency:</i>	<i>After Hours Phone:</i> (619)
Please contact provider for	FAMILY HEALTH CENTERS OF	515-2338
Accessibility information	SAN DIEGO	<i>Website:</i>
<i>Hours:</i> M-F 8:30AM-5PM	352 L ST	www.beaconhealthoptions.com
	CHULA VISTA, CA 91911-1208	<i>Accepting New Patients:</i> Yes
MENDEZ PEREZ, MARIA C ,		<i>Site English Spoken:</i> Yes
CSW		<i>Site Language(s) Spoken:</i>
<i>Provider Gender:</i> Female		American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014

NPI: 1639403884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F
8:30AM-12:30PM

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014

NPI: 1639403884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

MILLER, DON E , PSY

Provider Gender: Male

License number: 3155

NPI: 1124068010

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

DON MILLER

815 THIRD AVE STE 307

CHULA VISTA, CA 91911-1310

Phone: (619) 422-2358

Fax:

After Hours Phone: (619)

422-2358

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M 2PM-9PM, TU,W,F

12PM-9PM, TH 6PM-9PM, SA

12AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Portuguese, Russian, Spanish,

Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

Hours:

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Spanish TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M 9AM-8PM, TU,W,F 9AM-5PM, TH 12PM-8PM	8:30AM-12:30PM NOUHI, NUSHA, PSY Provider Gender: Female License number: 27670 NPI: 1942433917 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
NAFICY, MAJID, MD Provider Gender: Male License number: G70878 NPI: 1265564553 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 835 THIRD AVE CHULA VISTA, CA 91911-1352 Phone: (619) 427-4661 Fax: (619) 426-7849 After Hours Phone: (619) 427-4661 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Farsi,	NAZARIO, JACOBETH, PSY Provider Gender: Female License number: PSY32092 NPI: 1326648684 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F	NOUHI, NUSHA, PSY Provider Gender: Female License number: 27670 NPI: 1942433917 Provider English Spoken: Yes Provider Language(s) Spoken: Farsi Cultural Competency: FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

OBRYAN, KELLY, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651

NPI: 1629500301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651

NPI: 1629500301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651

NPI: 1629500301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

9AM-4:15PM, F
8:30AM-12:30PM

ORBE, KERIN, MD

Provider Gender: Female
License number: 20A17225
NPI: 1114256690
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ORBE, KERIN, MD

Provider Gender: Female
License number: 20A17225
NPI: 1114256690
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

PALITZ, JEFF, MFT

Provider Gender: Male
License number: 41250
NPI: 1801039094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PALITZ, JEFF
2400 FENTON ST STE 205
CHULA VISTA, CA 91914-4556
Phone: (619) 271-8886
Fax: (619) 414-1277
After Hours Phone: (619)
271-8886
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W,F 8AM-5PM, TU,TH
10:30AM-6:30PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

9AM-4:15PM, F
8:30AM-12:30PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
352 L ST
CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

QUIROZ, NORMA, MFT

Provider Gender: Female
License number: 50504
NPI: 1902945199
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female
License number: 72987
NPI: 1033426374
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female
License number: 72987
NPI: 1033426374
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

REGHABI, NASEEM, PSY

Provider Gender: Female
License number: 21940
NPI: 1225573421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

RENTERIA, SABRINA, MD

Provider Gender: Female
License number: A145894
NPI: 1285029421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

RENTERIA, SABRINA, MD

Provider Gender: Female
 License number: A145894
 NPI: 1285029421
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

RODRIGUEZ, CHRISTINE, PSY

Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No		248 LANDIS AVE
Min/Max Age:	ROSENFARB, BARBARA, CSW	CHULA VISTA, CA 91910-2609
Gender Restriction: No Gender Restrictions	Provider Gender: Female	Phone: (619) 515-2338
American Sign Language (ASL): Yes	License number: 28590	Fax: (619) 702-8536
Please contact provider for Accessibility information	NPI: 1447477781	After Hours Phone: (619) 515-2338
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Provider English Spoken: Yes	Website:
	Provider Language(s) Spoken:	www.beaconhealthoptions.com
	Cultural Competency:	Accepting New Patients: Yes
	FAMILY HEALTH CENTERS OF SAN DIEGO	Site English Spoken: Yes
	352 L ST	Site Language(s) Spoken:
	CHULA VISTA, CA 91911-1208	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
	Phone: (619) 515-2338	TDD: No
	Fax: (619) 702-8536	Min/Max Age: 0/99
	After Hours Phone: (619) 515-2338	Gender Restriction: No Gender Restrictions
	Website:	American Sign Language (ASL): Yes
	www.beaconhealthoptions.com	Please contact provider for Accessibility information
	Accepting New Patients: Yes	Hours: M-F 8:30AM-5PM
	Site English Spoken: Yes	
	Site Language(s) Spoken:	
	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	
	TDD: No	
	Min/Max Age:	ROZELL, KATHY, CSW
	Gender Restriction: No Gender Restrictions	Provider Gender: Female
	American Sign Language (ASL): Yes	License number: 25068
	Please contact provider for Accessibility information	NPI: 1578603973
	Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Provider English Spoken: Yes
		Provider Language(s) Spoken:
		Cultural Competency:
		FAMILY HEALTH CENTERS OF SAN DIEGO
		352 L ST
		CHULA VISTA, CA 91911-1208
		Phone: (619) 515-2338
		Fax: (619) 702-8536
		After Hours Phone: (619) 515-2338
		Website:
		www.beaconhealthoptions.com
		Accepting New Patients: Yes
		Site English Spoken: Yes
		Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

ROZELL, KATHY, CSW

Provider Gender: Female

License number: 25068

NPI: 1578603973

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours:

ROZELL, KATHY, CSW

Provider Gender: Female

License number: 25068

NPI: 1578603973

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SABEN, LAURENCE R , MD

Provider Gender: Male

License number: G27446

NPI: 1669454898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SABEN, LAURENCE

330 MOSS ST

CHULA VISTA, CA 91911-2005

Phone: (619) 440-7831

Fax: (619) 440-0540

After Hours Phone: (619)

440-7831

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: Yes

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 11AM-6PM

SACHS, MELISSA R , CSW

Provider Gender: Female

License number: 76968

NPI: 1649760356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
SANDERS, MARY, CSW <i>Provider Gender:</i> Female <i>License number:</i> 68062 <i>NPI:</i> 1740529189 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208	SEPULVEDA, JOE, MD <i>Provider Gender:</i> Male <i>License number:</i> A113283 <i>NPI:</i> 1306165402 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SHEARED, JORDAN S , CSW
Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

SHEARED, JORDAN S , CSW
Provider Gender: Female
License number: ASW74739
NPI: 1699121749
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

SIMONENKO, IOURI I , MD
Provider Gender: Male
License number: A147937
NPI: 1891956157
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO

248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW
Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F
8:30AM-12:30PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW
Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours:
STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:
STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM
STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT
Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours:
TAHBAZ, ASH, MFT
Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

TAHBAZ, ASH, MFT
Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

**THICKSTUN, MARY SUSAN,
 CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: THICKSTUN, MARY SUSAN, CSW Provider Gender: Female License number: 21573 NPI: 1437354875 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Provider Gender: U License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM
THICKSTUN, MARY SUSAN, CSW Provider Gender: Female License number: 21573 NPI: 1437354875 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese TDD: No	THICKSTUN, MARY SUSAN, CSW Provider Gender: Female License number: 21573 NPI: 1437354875 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TONG, GARRICK, MD Provider Gender: Male License number: A102192 NPI: 1831361278 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST
	THIESSEN, BRUCE L , PSY	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Portuguese, Russian, Spanish,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Vietnamese, Yue
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M 8:30AM-5PM, TU
 9AM-4:15PM, F
 8:30AM-12:30PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 352 L ST
 CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 251 LANDIS AVE
 CHULA VISTA, CA 91910-2628
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi,

Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 248 LANDIS AVE
 CHULA VISTA, CA 91910-2609
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

WAUGH, BRANDON, CSW <i>Provider Gender:</i> Male <i>License number:</i> 83457 <i>NPI:</i> 1619459187 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
WEAVER, JHOSMARA A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 77233 <i>NPI:</i> 1982848594 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	WEBSTER, KRISTIN K , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW16118 <i>NPI:</i> 1902336837 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes	WEBSTER, KRISTIN K , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW16118 <i>NPI:</i> 1902336837 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118

NPI: 1902336837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

WEISER, PENNY H , PSY

Provider Gender: Female

License number: PSY16796

NPI: 1518180330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

WEISER, PENNY

815 THIRD AVE STE 107

CHULA VISTA, CA 91911-1308

Phone: (619) 615-9982

Fax: (619) 426-1906

After Hours Phone: (619)

615-9982

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,TH 10AM-7PM, W
12PM-8PM, F 9AM-3PM

WIGLE, CHARLES E , MFT

Provider Gender: Male

License number: MFC29757

NPI: 1407911878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,

Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

WIGLE, CHARLES E , MFT

Provider Gender: Male

License number: MFC29757

NPI: 1407911878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

WITT, ANNETTE, CSW

Provider Gender: Female

License number: 15770

NPI: 1912263468

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female

License number: 15770

NPI: 1912263468

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

WITT, ANNETTE, CSW

Provider Gender: Female

License number: 15770

NPI: 1912263468

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

248 LANDIS AVE

CHULA VISTA, CA 91910-2609

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Vietnamese, Yue

Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

251 LANDIS AVE

CHULA VISTA, CA 91910-2628

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899

NPI: 1245635564

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887

NPI: 1417471459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M 8:30AM-5PM, TU

9AM-4:15PM, F

8:30AM-12:30PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

352 L ST

CHULA VISTA, CA 91911-1208

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M 8:30AM-5PM, TU
9AM-4:15PM, F
8:30AM-12:30PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YSLA, FRANCIS M , MD

Provider Gender: Male
License number: A155712
NPI: 1578978854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
248 LANDIS AVE
CHULA VISTA, CA 91910-2609
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Vietnamese, Yue
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YSLA, FRANCIS M , MD

Provider Gender: Male
License number: A155712
NPI: 1578978854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 352 L ST CHULA VISTA, CA 91911-1208 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M 8:30AM-5PM, TU 9AM-4:15PM, F 8:30AM-12:30PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
ZARANKOW, BEATA, MD <i>Provider Gender:</i> Female <i>License number:</i> C53656 <i>NPI:</i> 1902995384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> COMMUNITY RESEARCH FOUNDATION INC 835 THIRD AVE CHULA VISTA, CA 91911-1352 <i>Phone:</i> (619) 427-4661 <i>Fax:</i> (619) 426-7849 <i>After Hours Phone:</i> (619) 427-4661 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Farsi, Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 9AM-8PM, TU,W,F 9AM-5PM, TH 12PM-8PM	ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 248 LANDIS AVE CHULA VISTA, CA 91910-2609	ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 251 LANDIS AVE CHULA VISTA, CA 91910-2628 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,
ZAYAS, GILBERTO, MD <i>Provider Gender:</i> Male <i>License number:</i> A136760 <i>NPI:</i> 1508174970 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Portuguese, Russian, Spanish,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

DEL MAR

MOTAGHED, HENGAMEH, PSY

Provider Gender: Female
License number: 12707
NPI: 1366550592
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
MOTAGHED, HENGAMEH
14034 BOQUITA DR
DEL MAR, CA 92014-2945
Phone: (619) 969-6790
Fax:
After Hours Phone: (619)
969-6790
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Farsi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

SHEZIFI, ODED R , PSY

Provider Gender: Male
License number: 21162
NPI: 1366647489
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hebrew
Cultural Competency:
SHEZIFI, ODED
317 14TH ST STE E
DEL MAR, CA 92014-2554
Phone: (858) 260-3583
Fax:
After Hours Phone: (858)
260-3583
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Hebrew
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

ENCINITAS

BROAD RANSON, NICOLA M , CSW

Provider Gender: Female
License number: 18469
NPI: 1326082165
Provider English Spoken: Yes
Provider Language(s) Spoken:
French
Cultural Competency:
RANSON, NICOLA LCSW
VIRTUAL VISITS ONLY
ENCINITAS, CA 92024

Phone: (760) 753-2604
Fax:
After Hours Phone: (760)
753-2604
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
French
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 10AM-5PM

EL CAJON

ABDULLAH, KERI, PSY

Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ABDULLAH, KERI, PSY

Provider Gender: Female
 License number: 29990
 NPI: 1699840587
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

ALAVI, ALI S , MD

Provider Gender: Male

License number: A163793

NPI: 1356856694

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALAVI, ALI S , MD

Provider Gender: Male

License number: A163793

NPI: 1356856694

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

ALFARO, AMY, CSW

Provider Gender: Female

License number: 72874

NPI: 1609326859

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALFARO, AMY, CSW

Provider Gender: Female

License number: 72874

NPI: 1609326859

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

ALLEN, JOHN W , MD

Provider Gender: Male

License number: C37706

NPI: 1659382588

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

ALLEN, JOHN

225 W MADISON AVE STE 2

EL CAJON, CA 92020-3454

Phone: (619) 631-4505

Fax: (619) 713-6290

After Hours Phone: (619)

631-4505

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W 9AM-6PM, TU,TH,F 9AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female
 License number: 125942
 NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751
 Fax:
 After Hours Phone: (619) 440-2751
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W-F 8AM-5PM, TU 8AM-8PM

ARAGON, DARINKA M , MD

Provider Gender: Female

License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ARNOLD, REBECCA L , MFT

Provider Gender: Female

License number: LMFT95778
 NPI: 1225580350
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
 Phone: (619) 440-2751

Fax:
 After Hours Phone: (619) 440-2751
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W-F 8AM-5PM, TU 8AM-8PM

ASH, VIVIAN, CSW

Provider Gender: Female
 License number: 14619
 NPI: 1033623293
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
 License number: 14619
 NPI: 1033623293
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
 License number: LCSW75956
 NPI: 1083056279
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956
 NPI: 1083056279
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BANZON, CHARLES, MFT

Provider Gender: Male
 License number: 49126
 NPI: 1457422966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BANZON, CHARLES, MFT

Provider Gender: Male
 License number: 49126
 NPI: 1457422966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
 License number: 90529
 NPI: 1194159871
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BARCELOS ANTONIO, TIAGO,

CSW
 Provider Gender: Male
 License number: 90529
 NPI: 1194159871
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
 License number: 86542
 NPI: 1720339708
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
 License number: 86542
 NPI: 1720339708
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

BELINSKY, MARIA T , CSW
Provider Gender: Female

License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
License number: 76466
NPI: 1558659797
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female
License number: 76466
NPI: 1558659797
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM BENZL, JERRY F , MD Provider Gender: Male License number: A154471 NPI: 1487032082 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM BENZL, JERRY F , MD Provider Gender: Male	License number: A154471 NPI: 1487032082 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007	Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
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J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female

License number: 31625

NPI: 1497081566

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Nepali (Individual Language)

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)

440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

BHATIA, PRAKASH K , MD

Provider Gender: Male

License number: A74848

NPI: 1164464137

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

BHATIA HEALTH SERVICES A MEDICAL CORPORATION

161 E MAIN ST STE 100

EL CAJON, CA 92020-3993

Phone: (619) 631-0128

Fax: (619) 631-0153

After Hours Phone: (619)

631-0128

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/64

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W 9AM-5PM, F 12:30PM-4PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387

NPI: 1639308265

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BRANNEN, MANDY, NPA

Provider Gender: Female
 License number: 95007286
 NPI: 1891205159
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
 Phone: (619) 401-6236
 Fax: (619) 667-6036
 After Hours Phone: (619) 401-6236
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W,F 4PM-7PM BUBY, MYRA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 23172 <i>NPI:</i> 1093747511 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM BUBY, MYRA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 23172 <i>NPI:</i> 1093747511	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007	<i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM BURGOS, EDNA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 85597 <i>NPI:</i> 1134591167 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BURNS, PETER B , MD

Provider Gender: Male
License number: G145142
NPI: 1891727533
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BUTERBAUGH, KRISTY L ,

CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BYRNE, ANDREW L , MFT

Provider Gender: Male
License number: 53477
NPI: 1912213331
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
BYRNE, ANDREW
127 E LEXINGTON AVE
EL CAJON, CA 92020-4511
Phone: (619) 573-0682
Fax: (619) 328-6591
After Hours Phone: (619) 573-0682
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,TH 9AM-5PM, TU 9AM-8:30PM, W 9AM-9PM, F 1PM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653

NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

CANN, RONALD, MD

Provider Gender: Male
License number: G83523
NPI: 1285941401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 460 N MAGNOLIA AVE STE 110
 EL CAJON, CA 92020-3610
Phone: (619) 440-5133
Fax: (619) 440-8522
After Hours Phone: (619) 440-5133
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,TU,TH,F 9AM-5PM, W
9AM-7PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CARLTON PENN, CORNELIA, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY14310 <i>NPI:</i> 1891720611 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 <i>Phone:</i> (619) 440-2751 <i>Fax:</i> <i>After Hours Phone:</i> (619) 440-2751 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W-F 8AM-5PM, TU 8AM-8PM CASEY, SHANNON, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY31889 <i>NPI:</i> 1548873755	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 <i>Phone:</i> (619) 401-6236 <i>Fax:</i> (619) 667-6036 <i>After Hours Phone:</i> (619) 401-6236 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W,F 4PM-7PM CASTELLANOS, TERESITA D , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82782 <i>NPI:</i> 1598165441 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CASTELLANOS, TERESITA D , CSW <i>Provider Gender:</i> Female <i>License number:</i> 82782 <i>NPI:</i> 1598165441 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD

HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5:30PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CLONTS, PAUL A , CSW

Provider Gender: Male
License number: 87259
NPI: 1467808568
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819

Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CRUZ ARAUJO, ANDREA L , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: A160789
NPI: 1124401435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female
License number: A160789
NPI: 1124401435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26015
 NPI: 1700224037
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
 License number: 26015
 NPI: 1700224037
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DEBBOLD, ERIC M , MD

Provider Gender: Male
 License number: 164068
 NPI: 1144726415
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DEBBOLD, ERIC M , MD

Provider Gender: Male
 License number: 164068
 NPI: 1144726415
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
 Phone: (619) 515-2338
 Fax: (619) 269-0598
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5:30PM

DIAZ, LIZETH, CSW
 Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

DIAZ, LIZETH, CSW
 Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD
 Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

DOBOS, DAVID, MD
 Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW
Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM DYLAKE, JASMINE C , CSW Provider Gender: Female License number: 33-0743869 NPI: 1659782498 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM ECKL, CATHERINE, CSW Provider Gender: U	License number: 11004 NPI: 1841853322 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 215 W MADISON AVE EL CAJON, CA 92020-3405 Phone: (619) 401-6236 Fax: (619) 667-6036 After Hours Phone: (619) 401-6236 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W,F 4PM-7PM EDE, KEKOA, MD Provider Gender: Male License number: A101211 NPI: 1134224843 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com
DWYER, GEORGE, CSW Provider Gender: Male License number: 70988 NPI: 1437606126 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

ERBE, EDWARD J , MD

Provider Gender: Male

License number: G76886

NPI: 1952318289

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)
 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male

License number: G76886

NPI: 1952318289

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

FEDEROFF, MONICA, MD

Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FIGUERED, BRUCE, PSY

Provider Gender: Male
License number: PSY18899
NPI: 1326086307
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT
133 W MAIN ST
EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619) 401-0404
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Mandarin, Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FLOWERS, LAURA L , CSW

Provider Gender: Female
 License number: 74705
 NPI: 1437648862
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FLYNN CRUZ, MARY E , CSW

Provider Gender: Female

License number: 92918
 NPI: 1942814181
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FLYNN CRUZ, MARY E , CSW

Provider Gender: Female
 License number: 92918
 NPI: 1942814181
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FONSECA, ALIYA, MFT

Provider Gender: Female
 License number: 47462
 NPI: 1467763896
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 WAKING UP ON THE TOILET
 237 AVOCADO AVE STE 105
 EL CAJON, CA 92020-4638
 Phone: (619) 447-0910
 Fax:

After Hours Phone: (619) 447-0910
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: Yes
 Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FRAGOSO, DOMINIQUE, CSW

Provider Gender: U
License number: 12601
NPI: 1518521830
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
Phone: (619) 401-6236
Fax: (619) 667-6036
After Hours Phone: (619) 401-6236
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W,F 4PM-7PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female
License number: 16284
NPI: 1588795298
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female

License number: 16284

NPI: 1588795298

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

*Please contact provider for
Accessibility information*

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

*Please contact provider for
Accessibility information*

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

*Please contact provider for
Accessibility information*

Hours: M-F 8AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

*Please contact provider for
Accessibility information*

Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GANDY, SHARAREH, PSY

Provider Gender: Female
License number: PSY28097
NPI: 1730310723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS- BORREGO
 COMMUNITY HEALTH
 FOUNDAT

133 W MAIN ST
 EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619)
 401-0404
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Mandarin, Spanish,
 Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5:30PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667

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J. Directorio de proveedores de salud mental

NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GILLIS, RUTH, MFT
Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GILLIS, RUTH, MFT
Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY
Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA
Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

GOMEZ-NARANJO, PATRICIA A , MD

Provider Gender: Female
License number: A55544
NPI: 1053324541
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT
 133 W MAIN ST
 EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619) 401-0404
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Mandarin, Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5:30PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female

License number: 87716

NPI: 1134597123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female

License number: 87716

NPI: 1134597123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female

License number: NP15657

NPI: 1790757623

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH

PARTNERS- BORREGO

COMMUNITY HEALTH

FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female

License number: 26883

NPI: 1194999276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

GUTIERREZ, APRIL P , CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM
HALGEDAHL, YI TING, NPA
Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Chinese
Cultural Competency:
INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT
133 W MAIN ST
EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619)
401-0404
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Mandarin, Spanish,
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
HANNA-HADDAD, WEGDAN, PSY
Provider Gender: Female
License number: PSY26481
NPI: 1457769333
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic

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J. Directorio de proveedores de salud mental

Cultural Competency:
INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT
 133 W MAIN ST
 EL CAJON, CA 92020-3315
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619) 401-0404
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Mandarin, Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HAYDAR, SUSAN, PSY
Provider Gender: Female
License number: PSY24934
NPI: 1730452400
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency:
NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

HAYDEN WADE, HELEN, PSY
Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313

NPI: 1366951105

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

HECKMAN, KELEY, CSW

Provider Gender: U

License number: 68697

NPI: 1801948187

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

215 W MADISON AVE

EL CAJON, CA 92020-3405

Phone: (619) 401-6236

Fax: (619) 667-6036

After Hours Phone: (619)

401-6236

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W,F 4PM-7PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male

License number: PSY11197

NPI: 1740213487

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual
Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female

License number: 26598

NPI: 1134401805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)
515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female

License number: A133711

NPI: 1174960686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female

License number: A133711

NPI: 1174960686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
ISHIDA, YO, CSW
 Provider Gender: Female
 License number: 29526
 NPI: 1225154081
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JACKSON, TIENNA S , CSW

Provider Gender: Female

License number: 89122
 NPI: 1194976225
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female

License number: 20A13931

NPI: 1679834022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female

License number: 20A13931

NPI: 1679834022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619) 515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female

License number: 26493

NPI: 1871772020

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAUREGUI, CYNTHIA J , MFT
 Provider Gender: Female
 License number: 46152
 NPI: 1003953886
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAUREGUI, CYNTHIA J , MFT
 Provider Gender: Female
 License number: 46152
 NPI: 1003953886
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, ADELE, PSY
 Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, ADELE, PSY
 Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM JONES, ATAVIA L , CSW Provider Gender: Female License number: LCSW76796 NPI: 1952734899 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM JONES, ATAVIA L , CSW Provider Gender: Female License number: LCSW76796 NPI: 1952734899 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM JONES, ATAVIA L , CSW Provider Gender: Female License number: LCSW76796 NPI: 1952734899 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM JONES, MICHAEL A , CSW Provider Gender: Male	License number: LCS 22452 NPI: 1548205719 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM JONES, MICHAEL A , CSW Provider Gender: Male License number: LCS 22452 NPI: 1548205719 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KAHLY, BROOKE, CSW

Provider Gender: U
License number: 84367
NPI: 1649833120
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
Phone: (619) 401-6236
Fax: (619) 667-6036
After Hours Phone: (619) 401-6236
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W,F 4PM-7PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KELLEY, KIMBERLY L , CSW
Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
KHAN, MAYSUN, CSW
Provider Gender: Female
License number: 71910
NPI: 1033519632
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Arabic, Hindi, Nepali (Individual Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,W-F 8AM-5PM, TU 8AM-8PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460

NPI: 1851573554

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
License number: PSY20233
NPI: 1174964399
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
License number: PSY20233
NPI: 1174964399
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 680 FLETCHER PKWY STE 200
 EL CAJON, CA 92020-2500

Phone: (619) 515-2338
 Fax: (619) 269-0598
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5:30PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

LLAMAS, SASHA G , CSW

Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LLAMAS, SASHA G , CSW

Provider Gender: Female
License number: 94249
NPI: 1356713739
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5:30PM

LYDIARD, JESSICA, MD

Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 215 W MADISON AVE
 EL CAJON, CA 92020-3405
Phone: (619) 401-6236
Fax: (619) 667-6036
After Hours Phone: (619)
 401-6236
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W,F 4PM-7PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:

NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619)
440-2751

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE

855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619)
440-2751
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
License number: 88399
NPI: 1487128617

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MALAK, LAWRENCE, MD
Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MALAK, LAWRENCE, MD
Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MARTINEZ, IVONNE B , CSW
Provider Gender: Female
License number: 85604
NPI: 1225355498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE, MD
Provider Gender: Female
License number: 152787
NPI: 1699126367
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE, MD

Provider Gender: Female

License number: 152787

NPI: 1699126367

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

MATIALEU, LEOPOLDINE, MD

Provider Gender: Female

License number: A152369

NPI: 1255759718

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

855 E MADISON AVE

EL CAJON, CA 92020-3819

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 440-2751

Fax:

After Hours Phone: (619)
440-2751

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Hindi, Nepali (Individual
Language), Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W-F 8AM-5PM, TU
8AM-8PM

MAXWELL, MELISSA K , CSW

Provider Gender: U

License number: 90791

NPI: 1275182826

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

215 W MADISON AVE

EL CAJON, CA 92020-3405

Phone: (619) 401-6236

Fax: (619) 667-6036

After Hours Phone: (619)

401-6236

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,W,F 4PM-7PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5:30PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM MCHENRY, KELLY, CSW Provider Gender: Female License number: 29689 NPI: 1851544340 Provider English Spoken: Yes Provider Language(s) Spoken: American Sign Language Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM MCHENRY, KELLY, CSW Provider Gender: Female License number: 29689 NPI: 1851544340 Provider English Spoken: Yes	Provider Language(s) Spoken: American Sign Language Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM MEJIAS, JUAN C , PSY Provider Gender: Male License number: 26953 NPI: 1558560730 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MENDEZ PEREZ, MARIA C , CSW

Provider Gender: Female
License number: 89151
NPI: 1356902795
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MILLER, BRIAN P , MD
Provider Gender: Male
License number: A68180
NPI: 1861411381
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 MILLER, BRIAN

1460 E MAIN ST
 EL CAJON, CA 92021-8617
Phone: (858) 939-4393
Fax: (619) 740-4807
After Hours Phone: (858)
 939-4393
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>NPI:</i> 1629453691 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
MILLICAN, RUTH, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25354 <i>NPI:</i> 1346472305 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	MODAD, ALBERT, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29697 <i>NPI:</i> 1629453691 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499	MORALES MORENO, MINERVA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 63550 <i>NPI:</i> 1841337565 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM MORALES MORENO, MINERVA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 63550 <i>NPI:</i> 1841337565 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094	<i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710	<i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NARANJO, JORGE, MD <i>Provider Gender:</i> Male <i>License number:</i> A62504 <i>NPI:</i> 1992838684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT 133 W MAIN ST EL CAJON, CA 92020-3315 <i>Phone:</i> (619) 401-0404 <i>Fax:</i> (619) 401-0522 <i>After Hours Phone:</i> (619) 401-0404 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Arabic, Mandarin, Spanish,
Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1664 BROADWAY
EL CAJON, CA 92021-5201
Phone: (619) 579-8685
Fax: (619) 579-1969
After Hours Phone: (619)
579-8685
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5:30PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072	<i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM OBRYAN, KELLY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 24966 <i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM OBRYAN, KELLY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 24966 <i>NPI:</i> 1093882698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 <i>Phone:</i> (619) 515-2499 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2499 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

OGLESBY, MONIQUE M , PSY

Provider Gender: Female
License number: PSY26802
NPI: 1831240720
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5:30PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ORBE, KERIN, MD

Provider Gender: Female
License number: 20A17225
NPI: 1114256690
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OTIS, JOHN L , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: G28506
NPI: 1235154535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 OTIS, JOHN
 1580 BROADWAY
 EL CAJON, CA 92021-5124
Phone: (619) 579-8745
Fax: (619) 579-1328
After Hours Phone: (619)
 579-8745
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619)
 440-2751
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA
Provider Gender: Female
License number: 95004145
NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PRESLEY, ARNOLD S , PSY
Provider Gender: Male
License number: 23795
NPI: 1205017688
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
CONCEPT HEALTHCARE PSYCHOLOGY GROUP
 1340 E MADISON AVE
 EL CAJON, CA 92021-8501
Phone: (866) 284-0478
Fax: (888) 977-1204
After Hours Phone: (866) 284-0478
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW
Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD
Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

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J. Directorio de proveedores de salud mental

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:
Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female

License number: 50504

NPI: 1902945199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

QUIROZ, NORMA, MFT

Provider Gender: Female

License number: 50504

NPI: 1902945199

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

RABBAN, DIANA, CSW

Provider Gender: Female

License number: 72987

NPI: 1033426374

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

RATNIEWSKI, JANET, PSY

Provider Gender: Female

License number: PSY26406

NPI: 1245649599

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT

133 W MAIN ST

EL CAJON, CA 92020-3315

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619)

401-0404

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Mandarin, Spanish,
Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

RENTERIA, SABRINA, MD

Provider Gender: Female

License number: A145894

NPI: 1285029421

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RENTERIA, SABRINA, MD
Provider Gender: Female
License number: A145894
NPI: 1285029421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:

After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Hindi, Nepali (Individual
Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W-F 8AM-5PM, TU
8AM-8PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:

After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 53359 NPI: 1447334883 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W-F 8AM-5PM, TU 8AM-8PM
ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	ROSENFARB, BARBARA, CSW Provider Gender: Female License number: 28590 NPI: 1447477781 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	ROZELL, KATHY, CSW Provider Gender: Female License number: 25068 NPI: 1578603973 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710
ROSS, ANNE T, NPA Provider Gender: Female	ROSS, ANNE T, NPA Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2499
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SABEN, LAURENCE R, MD
 Provider Gender: Male
 License number: G27446
 NPI: 1669454898
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SABEN, LAURENCE
 615 E LEXINGTON AVE
 EL CAJON, CA 92020-4617
 Phone: (619) 440-7831
 Fax: (619) 440-0540
 After Hours Phone: (619)
 440-7831
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7AM-6PM

SCHEUBER, TIMOTHY, PSY
 Provider Gender: Male
 License number: PSY26681
 NPI: 1083017396
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS- BORREGO
 COMMUNITY HEALTH
 FOUNDAT
 133 W MAIN ST
 EL CAJON, CA 92020-3315
 Phone: (619) 401-0404
 Fax: (619) 401-0522
 After Hours Phone: (619)
 401-0404
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Mandarin, Spanish,
 Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

SEPULVEDA, JOE, MD
 Provider Gender: Male
 License number: A113283
 NPI: 1306165402
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
 Phone: (619) 515-2499
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2499

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM SHEARED, JORDAN S , CSW Provider Gender: Female License number: ASW74739 NPI: 1699121749 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 525 E MAIN ST EL CAJON, CA 92020-4007 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender	Hours: M-F 8AM-5PM SHEARED, JORDAN S , CSW Provider Gender: Female License number: ASW74739 NPI: 1699121749 Provider English Spoken: Yes	SIMPSON, JENNIFER, CSW Provider Gender: Female License number: 82678 NPI: 1740765866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW
Provider Gender: Female
License number: 82678
NPI: 1740765866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
SINGH, PARDEEP, NPA
Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:

After Hours Phone: (619)
 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual
 Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W-F 8AM-5PM, TU
 8AM-8PM

SIPIN, ELVIRA P , CSW
Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW
Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

680 FLETCHER PKWY STE 200

EL CAJON, CA 92020-2500

Phone: (619) 515-2338

Fax: (619) 269-0598

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5:30PM

SPAHR, CHRISTIE C , MFT

Provider Gender: Female

License number: 51792

NPI: 1295085736

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

STA ROMANA, JOSEFINA, MD

Provider Gender: Female

License number: C52364

NPI: 1003972175

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

460 N MAGNOLIA AVE STE 110

EL CAJON, CA 92020-3610

Phone: (619) 440-5133

Fax: (619) 440-8522

After Hours Phone: (619)

440-5133

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU,TH,F 9AM-5PM, W

9AM-7PM

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STEWART, ANDREA M , MFT

Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STONE, CALVIN, MD

Provider Gender: Male
License number: 20A18127
NPI: 1275995870

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751

Fax:
After Hours Phone: (619) 440-2751
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: NEIGHBORHOOD HEALTHCARE
855 E MADISON AVE
EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:

After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM THIESSEN, BRUCE L , PSY Provider Gender: U License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM THOMAS, PAULA M , CSW Provider Gender: Female License number: 29517 NPI: 1821389966 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W-F 8AM-5PM, TU 8AM-8PM THOMPSON, STEPHANIE G , CSW Provider Gender: Female License number: 75185 NPI: 1861938227 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE 855 E MADISON AVE EL CAJON, CA 92020-3819 Phone: (619) 440-2751 Fax: After Hours Phone: (619) 440-2751 Website: www.beaconhealthoptions.com Accepting New Patients: Yes	Site English Spoken: Yes Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M,W-F 8AM-5PM, TU 8AM-8PM TONG, GARRICK, MD Provider Gender: Male License number: A102192 NPI: 1831361278 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Yue Chinese Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1111 W CHASE AVE EL CAJON, CA 92020-5710 Phone: (619) 515-2499 Fax: (619) 702-8536 After Hours Phone: (619) 515-2499 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710

Phone: (619) 515-2499
Fax: (619) 702-8536

After Hours Phone: (619)
515-2499

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499

Fax: (619) 702-8536
After Hours Phone: (619)
515-2499

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
680 FLETCHER PKWY STE 200
EL CAJON, CA 92020-2500
Phone: (619) 515-2338
Fax: (619) 269-0598
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5:30PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE

855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female
License number: 77233
NPI: 1982848594
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
License number: LCSW16118
NPI: 1902336837
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118

NPI: 1902336837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

WESH, MADELINE, PSY

Provider Gender: Female

License number: 31736

NPI: 1285864918

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

215 W MADISON AVE

EL CAJON, CA 92020-3405

Phone: (619) 401-6236

Fax: (619) 667-6036

After Hours Phone: (619)

401-6236

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,W,F 4PM-7PM

WIGLE, CHARLES E , MFT

Provider Gender: Male

License number: MFC29757

NPI: 1407911878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

525 E MAIN ST

EL CAJON, CA 92020-4007

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

WIGLE, CHARLES E , MFT

Provider Gender: Male

License number: MFC29757

NPI: 1407911878

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1111 W CHASE AVE

EL CAJON, CA 92020-5710

Phone: (619) 515-2499

Fax: (619) 702-8536

After Hours Phone: (619)

515-2499

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female

License number: 19664

NPI: 1578865549

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

WILSON, NICOLE M , CSW
Provider Gender: Female
License number: 94855
NPI: 1033576400
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WITT, ANNETTE, CSW
Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
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Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA
Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD HEALTHCARE
 855 E MADISON AVE
 EL CAJON, CA 92020-3819
Phone: (619) 440-2751
Fax:
After Hours Phone: (619) 440-2751
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M,W-F 8AM-5PM, TU 8AM-8PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

YSLA, FRANCIS M , MD
Provider Gender: Male
License number: A155712
NPI: 1578978854
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 525 E MAIN ST
 EL CAJON, CA 92020-4007
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD
Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1111 W CHASE AVE
 EL CAJON, CA 92020-5710
Phone: (619) 515-2499
Fax: (619) 702-8536
After Hours Phone: (619) 515-2499
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ENCINITAS

ALTAMIRANO, LEON, PSY
Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BUCKLEY, LISA J , PSY
Provider Gender: Female
License number: 15155
NPI: 1699873976
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 BUCKLEY, LISA
 1991 VILLAGE PARK WAY STE 202B
 ENCINITAS, CA 92024-1967
Phone: (760) 943-1226
Fax: (760) 634-7961
After Hours Phone: (760) 943-1226
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: TU,TH,F 8AM-5PM, W 8AM-7PM

BURCIAGA, HENRY, MFT
Provider Gender: Male
License number: MFT19940
NPI: 1487785705
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHALMERS, VIRGINIA, CSW
Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008

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J. Directorio de proveedores de salud mental

Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
 License number: 22852
 NPI: 1790122638
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female
 License number: 102353
 NPI: 1093225823
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY

Provider Gender: Female
 License number: 22278
 NPI: 1952316648
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:

NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
 License number: 26184
 NPI: 1477785137
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish, Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
 Phone: (760) 736-6767
 Fax:
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese

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J. Directorio de proveedores de salud mental

Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462

NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
License number: 25138
NPI: 1063800217
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

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J. Directorio de proveedores de salud mental

GONZALEZ, JOSE, CSW

Provider Gender: Male
License number: 80920
NPI: 1689844847
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008

Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 1130 2ND ST
 ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Phone: (760) 736-6767
Fax:
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:

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J. Directorio de proveedores de salud mental

NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767

Fax:
After Hours Phone: (760) 736-6767

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

REBELO, MARCIA A , CSW
Provider Gender: Female
License number: 65679
NPI: 1649720566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
REBELO, MARCIA
187 CALLE MAGDALENA STE 212
ENCINITAS, CA 92024-3709
Phone: (760) 846-1284
Fax: (760) 634-5397
After Hours Phone: (760) 846-1284

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

RESNICK, CECILY A , PSY
Provider Gender: Female
License number: 16956
NPI: 1023122579
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
RESNICK, CECILY
535 ENCINITAS BLVD STE 110
ENCINITAS, CA 92024-3742
Phone: (760) 445-3737
Fax:
After Hours Phone: (760) 445-3737
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,TU 9AM-6PM

RIVERA, DEA R , MFT
Provider Gender: Female
License number: 39066
NPI: 1992967533
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency:
RIVERA, DEA
826 2ND ST
ENCINITAS, CA 92024-4408
Phone: (760) 334-3077

Fax:
After Hours Phone: (760) 334-3077

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M 12PM-8PM, TU 8AM-8PM, SA 8AM-4PM

SIMMONS, LILIANA C , NPA
Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767

Fax:
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>License number:</i> 28885 <i>NPI:</i> 1710110416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 1130 2ND ST ENCINITAS, CA 92024-5008 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
SIMMONS, SUZANNE, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95016129 <i>NPI:</i> 1245733450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 1130 2ND ST ENCINITAS, CA 92024-5008 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	TAYLOR, CORRDERO A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 71284 <i>NPI:</i> 1346501533 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 1130 2ND ST ENCINITAS, CA 92024-5008 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767	TORRES, HECTOR M , PSY <i>Provider Gender:</i> Male <i>License number:</i> 13309 <i>NPI:</i> 1720265614 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 1130 2ND ST ENCINITAS, CA 92024-5008 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for
SIMPSON, ERIC, PSY <i>Provider Gender:</i> Male		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female
License number: 93945
NPI: 1659898641
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767

Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008

Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
1130 2ND ST
ENCINITAS, CA 92024-5008
Phone: (760) 736-6767
Fax:
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ESCONDIDO

ANDERSEN, CLAIRE, MD

Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

ANDERSEN, CLAIRE, MD
Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD
Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD
Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD
Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ANDERSEN, CLAIRE, MD

Provider Gender: Female
 License number: 125942
 NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:
 After Hours Phone: (760) 520-8330
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BARMAK, SHANT, PSY

Provider Gender: Male
 License number: 24998
 NPI: 1235408972
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Armenian
 Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
 Phone: (619) 445-6200
 Fax: (619) 745-7847
 After Hours Phone: (619) 445-6200
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
 License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency:

NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual

Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CALOCA, LAURA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29757 <i>NPI:</i> 1134364698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i>	No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CALOCA, LAURA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29757 <i>NPI:</i> 1134364698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379 <i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CALOCA, LAURA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29757 <i>NPI:</i> 1134364698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	<i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CALOCA, LAURA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 29757 <i>NPI:</i> 1134364698 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760)
 737-6900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM
CALOCA, LAURA, PSY
 Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600

Fax:
 After Hours Phone: (760)
 466-8600
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE

460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760)
 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
 License number: PSY14310
 NPI: 1891720611
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760)
 520-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,

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J. Directorio de proveedores de salud mental

Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
460 N ELM ST

ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language),

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J. Directorio de proveedores de salud mental

Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA,

PSY
Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CASTILLO, TIFFANY A , MD

Provider Gender: Female
License number: A158480
NPI: 1114459252
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes

Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

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J. Directorio de proveedores de salud mental

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAFFEE, CHRISTI E , MFT

Provider Gender: Female
License number: 28950
NPI: 1881641983
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 CHAFFEE, CHRISTI
 327 S IVY ST
 ESCONDIDO, CA 92025-4337
Phone: (760) 791-7922
Fax: (760) 294-2151
After Hours Phone: (760) 791-7922
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

No
 Please contact provider for Accessibility information
Hours: M 12PM-3:30PM, TU 8AM-8PM, W 2PM-8PM, TH 8AM-4PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600

Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CLARK-JEFFERIES, TAKENYA C, CSW

Provider Gender: Female
License number: 62241
NPI: 1205087657
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:

After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107

NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish	728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 <i>Phone:</i> (760) 737-6900 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 737-6900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
 License number: 55107
 NPI: 1194242461
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
 License number: 84174
 NPI: 1619506250
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
 License number: 84174
 NPI: 1619506250
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760) 466-8600
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
 License number: 84174
 NPI: 1619506250
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female

License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CRUZ, GUADALUPE, CSW

Provider Gender: Male
License number: 83597
NPI: 1649727942
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

DANIEL, BELINDA, MD

Provider Gender: Female
License number: A158183
NPI: 1760913446
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes

Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

FERTIG, PATRICIA A , MD

Provider Gender: Female
License number: 20A14928
NPI: 1457642803
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:

After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female
License number: PSY24350
NPI: 1013071497

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
Phone: (619) 445-6200
Fax: (619) 745-7847
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GANDY, SHARAREH, PSY

Provider Gender: Female
License number: PSY28097
NPI: 1730310723
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS- BORREGO
 COMMUNITY HEALTH
 FOUNDAT
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760)
 871-0606

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Kiswahili, Swahili
 (Individual Language)
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763
NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691

After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HAMISI, KHADIJA H , NPA

Provider Gender: Female
License number: 20560
NPI: 1225360498
Provider English Spoken: Yes
Provider Language(s) Spoken:
Kiswahili, Swahili (Individual
Language)
Cultural Competency:
INTEGRATED HEALTH
PARTNERS- BORREGO
COMMUNITY HEALTH
FOUNDAT
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760)
871-0606

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Kiswahili, Swahili
(Individual Language)
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY
Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

HOLDEN, MATTHEW, PSY
Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY
Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY
Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760) 520-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HORSLEY, DEBRA L , CSW
 Provider Gender: Female
 License number: 15974
 NPI: 1205849825
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 HORSLEY, DEBRA
 332 S JUNIPER ST STE 203B
 ESCONDIDO, CA 92025-4942
 Phone: (760) 233-7730
 Fax: (760) 233-7730
 After Hours Phone: (760) 233-7730
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL):

No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-7PM, SA 8AM-3PM
KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760) 466-8600
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:

NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
 Provider Gender: Female
 License number: LCSW28504
 NPI: 1326272378
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
460 N ELM ST
ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
520-8100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW
Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes

Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LIU-BARBARO, DOROTHY, MD <i>Provider Gender:</i> Female <i>License number:</i> A115342 <i>NPI:</i> 1851602270 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM
LIU-BARBARO, DOROTHY, MD <i>Provider Gender:</i> Female <i>License number:</i> A115342 <i>NPI:</i> 1851602270 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379	LIU-BARBARO, DOROTHY, MD <i>Provider Gender:</i> Female <i>License number:</i> A115342 <i>NPI:</i> 1851602270 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i>	LONGACRE, BRETT, NPA <i>Provider Gender:</i> Male <i>License number:</i> 95003600 <i>NPI:</i> 1295089332 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM LONGACRE, BRETT, NPA <i>Provider Gender:</i> Male <i>License number:</i> 95003600 <i>NPI:</i> 1295089332

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW
Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW
Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

MACIAS, ZIRLEY, CSW
Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW
Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female

License number: 96997

NPI: 1245616887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)

466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male

License number: 88270

NPI: 1578983664

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
 License number: 88270
 NPI: 1578983664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
 License number: 88270
 NPI: 1578983664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760) 466-8600
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
 License number: 88270
 NPI: 1578983664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

MAGOS, DANIEL, CSW

Provider Gender: Male
 License number: 88270
 NPI: 1578983664
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
 Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760) 520-8200
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664

Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY

Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
Phone: (619) 445-6200
Fax: (619) 745-7847
After Hours Phone: (619) 445-6200
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MARTINEZ, NORAYMA, CSW

Provider Gender: Female
License number: 100019
NPI: 1669808267
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

NAVA-HERBERGER, ALEJANDRA, NPA

Provider Gender: Female
License number: 555127
NPI: 1093138422
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330

Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

NIAKAMAL, EVAN, NPA

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 58707
NPI: 1639796873
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

OSHRIN, HARVEY, MD

Provider Gender: Male
License number: G7257
NPI: 1952326324
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)
466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POPOCA LOGUE, ANA J , NPA

Provider Gender: Female

License number: 12900

NPI: 1437262219

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)
520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)
690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800

Fax: (858) 633-4694

After Hours Phone: (760)
466-9800

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)
520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

460 N ELM ST

ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100

Fax: (858) 633-4691

After Hours Phone: (760)

520-8100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

1001 E GRAND AVE

ESCONDIDO, CA 92025-4604

Phone: (760) 520-8200

Fax: (858) 633-4695

After Hours Phone: (760)

520-8200

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female

License number: A88938

NPI: 1750566915

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NEIGHBORHOOD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RATNIEWSKI, JANET, PSY
Provider Gender: Female
License number: PSY26406
NPI: 1245649599
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 INTEGRATED HEALTH PARTNERS- BORREGO COMMUNITY HEALTH FOUNDAT
 1121 E WASHINGTON AVE
 ESCONDIDO, CA 92025-2214
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Kiswahili, Swahili (Individual Language)
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RINGEL, BRENDA L , MD
Provider Gender: Female
License number: A65800
NPI: 1689869976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 EXODUS RECOVERY, INC.
 1520 S ESCONDIDO BLVD
 ESCONDIDO, CA 92025-6017
Phone: (760) 870-2020
Fax: (760) 489-1321
After Hours Phone: (760) 870-2020
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-4:30PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD
Provider Gender: Male

License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD
Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	1001 E GRAND AVE ESCONDIDO, CA 92025-4604 <i>Phone:</i> (760) 520-8200 <i>Fax:</i> (858) 633-4695 <i>After Hours Phone:</i> (760) 520-8200 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
RODARTE, GABRIEL, MD <i>Provider Gender:</i> Male <i>License number:</i> A87906 <i>NPI:</i> 1184649212 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No	RODARTE, GABRIEL, MD <i>Provider Gender:</i> Male <i>License number:</i> A87906 <i>NPI:</i> 1184649212 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 728 E VALLEY PKWY ESCONDIDO, CA 92025-3052 <i>Phone:</i> (760) 737-6900 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 737-6900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	RODARTE, GABRIEL, MD <i>Provider Gender:</i> Male <i>License number:</i> A87906 <i>NPI:</i> 1184649212 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 488 E VALLEY PKWY STE 404 ESCONDIDO, CA 92025-3379 <i>Phone:</i> (760) 466-9800 <i>Fax:</i> (858) 633-4694 <i>After Hours Phone:</i> (760) 466-9800 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male
 License number: A87906
 NPI: 1184649212
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

ROSS, ANNE T , NPA

Provider Gender: Female

License number: 53359
 NPI: 1447334883
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

ROSS, ANNE T , NPA

Provider Gender: Female
 License number: 53359
 NPI: 1447334883
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052

Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
 License number: 53359
 NPI: 1447334883
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
 Phone: (760) 690-5900
 Fax:
 After Hours Phone: (760) 690-5900
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359
NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SCHEUBER, TIMOTHY, PSY

Provider Gender: Male
License number: PSY26681
NPI: 1083017396
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
 520-8330
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379

Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
 520-8200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA

Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 460 N ELM ST ESCONDIDO, CA 92025-3002 <i>Phone:</i> (760) 520-8100 <i>Fax:</i> (858) 633-4691 <i>After Hours Phone:</i> (760) 520-8100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Hours:</i> M-F 8AM-5PM
SINGH, PARDEEP, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95010750 <i>NPI:</i> 1992279004 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 550 W WASHINGTON AVE ESCONDIDO, CA 92025-1643 <i>Phone:</i> (760) 466-8600 <i>Fax:</i> <i>After Hours Phone:</i> (760) 466-8600 <i>Website:</i> www.beaconhealthoptions.com	SINGH, PARDEEP, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95010750 <i>NPI:</i> 1992279004 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 426 N DATE ST ESCONDIDO, CA 92025-3409 <i>Phone:</i> (760) 690-5900 <i>Fax:</i> <i>After Hours Phone:</i> (760) 690-5900 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information	SINGH, PARDEEP, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95010750 <i>NPI:</i> 1992279004 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 425 N DATE ST ESCONDIDO, CA 92025-3413 <i>Phone:</i> (760) 520-8330 <i>Fax:</i> <i>After Hours Phone:</i> (760) 520-8330 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> Yes <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
	STANIGAR, JUDITH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25701 <i>NPI:</i> 1255501870 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hebrew <i>Cultural Competency:</i> NEIGHBORHOOD HEALTHCARE 1002 E GRAND AVE	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ESCONDIDO, CA 92025-4605
Phone: (760) 741-2660
Fax: (760) 741-2647
After Hours Phone: (760) 741-2660
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hebrew
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F

8AM-5PM, SA 8AM-12PM
STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330

Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD

Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY

Provider Gender: Male

License number: 18393

NPI: 1821013228

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

425 N DATE ST

ESCONDIDO, CA 92025-3413

Phone: (760) 520-8330

Fax:

After Hours Phone: (760)

520-8330

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: Yes

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

550 W WASHINGTON AVE

ESCONDIDO, CA 92025-1643

Phone: (760) 466-8600

Fax:

After Hours Phone: (760)

466-8600

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: (760) 690-5900

Fax:

After Hours Phone: (760)

690-5900

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY

Provider Gender: U

License number: 31075

NPI: 1932308442

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760)
 520-8100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-8PM, TH,F
 8AM-5PM, SA 8AM-12PM

TEETER-WITT, ALYSSA, PSY
Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
 466-9800
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY
Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
 737-6900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
 690-5900
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 520-8200
 Fax: (858) 633-4695
 After Hours Phone: (760) 520-8200
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
 Provider Gender: Female
 License number: 29517
 NPI: 1821389966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
 Phone: (760) 466-8600
 Fax:
 After Hours Phone: (760) 466-8600
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
 Provider Gender: Female
 License number: 29517
 NPI: 1821389966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
 Phone: (760) 520-8100
 Fax: (858) 633-4691
 After Hours Phone: (760) 520-8100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

THOMAS, PAULA M , CSW
 Provider Gender: Female
 License number: 29517
 NPI: 1821389966

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: (760) 520-8330
 Fax:
 After Hours Phone: (760) 520-8330
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
 Provider Gender: Female
 License number: 29517
 NPI: 1821389966
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
 Phone: (760) 737-6900
 Fax: (858) 633-4694
 After Hours Phone: (760) 737-6900
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:

NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE

425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,

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J. Directorio de proveedores de salud mental

Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-8PM, TH,F
8AM-5PM, SA 8AM-12PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760)
520-8200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

NEIGHBORHOOD
HEALTHCARE
426 N DATE ST
ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760)
690-5900
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM
VAQUERO, JUANA, PSY
Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:

After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY
Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY

ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY
Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 488 E VALLEY PKWY STE 404
 ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364

NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760)
520-8330
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
550 W WASHINGTON AVE
ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760)
466-8600
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760)
737-6900

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NEIGHBORHOOD
HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760)
466-9800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Nepali (Individual Language),
Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 1001 E GRAND AVE
 ESCONDIDO, CA 92025-4604
Phone: (760) 520-8200
Fax: (858) 633-4695
After Hours Phone: (760) 520-8200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002

Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 255 N ASH ST
 ESCONDIDO, CA 92027-3068
Phone: (619) 445-6200
Fax: (619) 745-7847
After Hours Phone: (619) 445-6200
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Armenian
TDD: No
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 426 N DATE ST
 ESCONDIDO, CA 92025-3409
Phone: (760) 690-5900
Fax:
After Hours Phone: (760) 690-5900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963

NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 728 E VALLEY PKWY
 ESCONDIDO, CA 92025-3052
Phone: (760) 737-6900
Fax: (858) 633-4694
After Hours Phone: (760) 737-6900
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 460 N ELM ST
 ESCONDIDO, CA 92025-3002
Phone: (760) 520-8100
Fax: (858) 633-4691
After Hours Phone: (760) 520-8100

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-8PM, TH,F 8AM-5PM, SA 8AM-12PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 550 W WASHINGTON AVE
 ESCONDIDO, CA 92025-1643
Phone: (760) 466-8600
Fax:
After Hours Phone: (760) 466-8600
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025-3379
Phone: (760) 466-9800
Fax: (858) 633-4694
After Hours Phone: (760) 466-9800
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
License number: 26963
NPI: 1639362494
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
425 N DATE ST
ESCONDIDO, CA 92025-3413
Phone: (760) 520-8330
Fax:
After Hours Phone: (760) 520-8330
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

IMPERIAL BEACH

BARTHOLOMEW, SARAH C, CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
742 10TH ST
IMPERIAL BEACH, CA
91932-2216

Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
742 10TH ST
IMPERIAL BEACH, CA
91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> DUNFORD, KATELYN C , MFT <i>Provider Gender:</i> Female <i>License number:</i> 126626 <i>NPI:</i> 1437517497 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 742 10TH ST IMPERIAL BEACH, CA 91932-2216 <i>Phone:</i> (619) 906-5322 <i>Fax:</i> (619) 271-4963 <i>After Hours Phone:</i> (619) 906-5322 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> FEDEROFF, MONICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A164677 <i>NPI:</i> 1912404492 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	<i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 742 10TH ST IMPERIAL BEACH, CA 91932-2216 <i>Phone:</i> (619) 906-5322 <i>Fax:</i> (619) 271-4963 <i>After Hours Phone:</i> (619) 906-5322 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> GAUD, KRISTINA G , MD <i>Provider Gender:</i> Female <i>License number:</i> 170667 <i>NPI:</i> 1508151598 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 742 10TH ST IMPERIAL BEACH, CA 91932-2216 <i>Phone:</i> (619) 906-5322 <i>Fax:</i> (619) 271-4963 <i>After Hours Phone:</i> (619) 906-5322 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> GLASSMAN, JAGA NATH, MD <i>Provider Gender:</i> Male <i>License number:</i> G55004 <i>NPI:</i> 1558409771 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 742 10TH ST IMPERIAL BEACH, CA 91932-2216 <i>Phone:</i> (619) 906-5322 <i>Fax:</i> (619) 271-4963 <i>After Hours Phone:</i> (619) 906-5322 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i>
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

GONZALEZ, CLAUDIA, CSW

Provider Gender: Female
License number: 100328
NPI: 1770055543
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE

IMPERIAL BEACH, CA 91932-1503
Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619) 429-3733
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

LYDIARD, JESSICA, MD

Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1396838082
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA 91932-2216
 Phone: (619) 906-5322
 Fax: (619) 271-4963
 After Hours Phone: (619) 906-5322
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

NGUYEN, MAILY, NPA

Provider Gender: Female
 License number: 95000861
 NPI: 1255732160
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA 91932-1503

Phone: (619) 429-3733
 Fax: (619) 575-7972
 After Hours Phone: (619) 429-3733
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

ROEHR, ARTHUR, NPA

Provider Gender: Male
 License number: 95012079
 NPI: 1851946016
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA 91932-1503
 Phone: (619) 429-3733
 Fax: (619) 575-7972
 After Hours Phone: (619) 429-3733
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No

Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

SOLTANI, MARYAM, MD

Provider Gender: Female
 License number: A139075
 NPI: 1518372267
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA 91932-1503
 Phone: (619) 429-3733
 Fax: (619) 575-7972
 After Hours Phone: (619) 429-3733
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

TRIANA, JENNIFER, CSW

Provider Gender: Female

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J. Directorio de proveedores de salud mental

License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 742 10TH ST
 IMPERIAL BEACH, CA
 91932-2216
Phone: (619) 906-5322
Fax: (619) 271-4963
After Hours Phone: (619) 906-5322
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

ZUREK, BEDEANIA R , CSW
Provider Gender: Female
License number: LCSW74215
NPI: 1942375811
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
IMPERIAL BEACH HEALTH CENTER
 949 PALM AVE
 IMPERIAL BEACH, CA
 91932-1503

Phone: (619) 429-3733
Fax: (619) 575-7972
After Hours Phone: (619) 429-3733
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-8PM, F 8AM-5PM, SA 8AM-12PM

LA JOLLA

HINTZ, SONYA D , MD
Provider Gender: Female
License number: G58561
NPI: 1790774446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
HINTZ, SONYA
 3252 HOLIDAY CT STE 100
 LA JOLLA, CA 92037-1807
Phone: (858) 455-6511
Fax: (858) 455-5747
After Hours Phone: (858) 455-6511
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7AM-7PM, F 9AM-6PM

OTIS, JOHN L , MD
Provider Gender: Male
License number: G28506
NPI: 1235154535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OTIS, JOHN
 8950 VILLA LA JOLLA DR STE A215
 LA JOLLA, CA 92037-1711
Phone: (858) 457-2180
Fax: (858) 457-2194
After Hours Phone: (858) 457-2180
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,TU,TH 2:30PM-5:30PM

LA MESA

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM AGUIRRE, LEAH B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 74440 <i>NPI:</i> 1306151998 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM ALTERS, DENNIS, MD <i>Provider Gender:</i> Male <i>License number:</i> G36206 <i>NPI:</i> 1457371635 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes	Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM ALVAREZ, DIANA P , CSW <i>Provider Gender:</i> Female <i>License number:</i> 81025 <i>NPI:</i> 1013200617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM ANDERSON, NICOLE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW28443 <i>NPI:</i> 1679766380 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i>
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J. Directorio de proveedores de salud mental

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8851 CENTER DR STE 312

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515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450

NPI: 1073518965

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female

License number: 14619

NPI: 1033623293

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

License number: LCSW75956

NPI: 1083056279

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

ATALLAH, HANI M , MD

Provider Gender: Male

License number: 132530

NPI: 1104169655

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
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TDD: No

Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BENNETT, RACHEL Q , CSW
Provider Gender: Female
License number: 76466
NPI: 1558659797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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American Sign Language, Farsi,

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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BERKSON, BARRIE, CSW
Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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American Sign Language, Farsi,
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BOND, ALAN, PSY
Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050

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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BORREGO, DIANA E , NPA
 Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
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 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BUBY, MYRA, CSW
 Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
 License number: 85597
 NPI: 1134591167
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW
 Provider Gender: Female
 License number: 65477
 NPI: 1346615838
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
 License number: A71653
 NPI: 1033133483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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Spanish, Yue Chinese
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 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

CARILLO, KRYSTAL I, CSW

Provider Gender: Female
 License number: 80068
 NPI: 1871906735
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

CARINO DIOKNO, RHODA,

PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
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 Accessibility information
 Hours: M-TH 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
 License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
 License number: 69616
 NPI: 1922313394
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

COMBS, LAURI, CSW

Provider Gender: Female
 License number: LCSW75330
 NPI: 1538398979
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
 License number: 28313
 NPI: 1780031831
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DALONSO, SANDRA L, CSW

Provider Gender: Female
 License number: 82240
 NPI: 1841797644
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
 License number: 26015
 NPI: 1700224037
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Website:
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
 License number: G57276
 NPI: 1548318348
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM
DWYER, GEORGE, CSW
Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
 License number: 19815
 NPI: 1134147457
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
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 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713
 NPI: 1366519670
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Japanese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
 License number: 16711
 NPI: 1174646301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
 License number: G55004
 NPI: 1558409771
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GONZALES, JULIANA, CSW

Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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J. Directorio de proveedores de salud mental

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 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GONZALEZ, ANDREA, CSW
 Provider Gender: Female
 License number: 97593
 NPI: 1326346198
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
 Provider Gender: Female
 License number: 87716
 NPI: 1134597123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GRACE, MONIKA M , PSY

Provider Gender: Female
 License number: 24462
 NPI: 1497985832
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Modern Greek, French,
 Portuguese, Spanish
 Cultural Competency:
 GRACE COUNSELING AND
 PSYCHOTHERAPY
 5575 LAKE PARK WAY STE
 100-6
 LA MESA, CA 91942-1664
 Phone: (619) 381-8472
 Fax:
 After Hours Phone: (619)
 381-8472
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Modern Greek, French,
 Portuguese, Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-SU 8AM-8PM

GUTIERREZ, APRIL P , CSW
 Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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After Hours Phone: (619) 515-2383
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

HARADON, SUSAN, PSY

Provider Gender: Female
License number: 6075
NPI: 1841289246
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 HARADON, SUSAN
 4700 SPRING ST STE 306
 LA MESA, CA 91942-2294
Phone: (619) 462-1611
Fax: (619) 460-8093
After Hours Phone: (619) 462-1611
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 9AM-7PM, F 9AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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J. Directorio de proveedores de salud mental

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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 www.beaconhealthoptions.com
Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JENSEN, DEXTER, MD

Provider Gender: Male
License number: A67960
NPI: 1740465541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

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 LA MESA, CA 91942-3050
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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, MICHAEL A , CSW

Provider Gender: Male
License number: LCS 22452
NPI: 1548205719
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

JOSHI, YASH, MD

Provider Gender: Male
License number: A147156
NPI: 1598151433
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
YASH JOSHI
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (619) 740-6000
Fax:
After Hours Phone: (619)
740-6000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266

NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
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Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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LA MESA, CA 91942-3050

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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
License number: A94460
NPI: 1851573554
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Japanese, Portuguese, Russian,
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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
 License number: A103468
 NPI: 1467650473
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
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 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female
 License number: A171775
 NPI: 1841731296
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050

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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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 Accepting New Patients: Yes
 Site English Spoken: Yes
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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
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 Website:
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MAHONEY, PATRICIA A , CSW
 Provider Gender: Female

License number: 22296
 NPI: 1700200888
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW
 Provider Gender: Female
 License number: 88399
 NPI: 1487128617
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

MARTIR, MICHEL, CSW
 Provider Gender: Female
 License number: 73174
 NPI: 1356528434
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8851 CENTER DR STE 312

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male

License number: 28907

NPI: 1841482692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MILLER, BRIAN P , MD

Provider Gender: Male
License number: A68180
NPI: 1861411381
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
MILLER, BRIAN
5555 GROSSMONT CENTER DR
LA MESA, CA 91942-3019
Phone: (858) 939-4393
Fax: (619) 740-5055
After Hours Phone: (858) 939-4393
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

MILLICAN, RUTH, PSY

Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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After Hours Phone: (619) 515-2383

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
License number: 63550
NPI: 1841337565
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes

Provider Language(s) Spoken: Japanese
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

MOYER, TRENTON E , MD

Provider Gender: Male
License number: A78165
NPI: 1437180791
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: MOYER, TRENTON
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942-3019
Phone: (619) 740-4800
Fax:
After Hours Phone: (619) 740-4800

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

MUNOZ, VIVIANA, CSW

Provider Gender: Female
License number: 66637
NPI: 1497987713
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312
LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female

License number: 27670

NPI: 1942433917

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

NWANGANGA, OKECHUKU R, CSW

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312

LA MESA, CA 91942-3050

Phone: (619) 515-2383

Fax: (619) 269-0883

After Hours Phone: (619)

515-2383

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
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515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
License number: A169651
NPI: 1629500301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OTIS, JOHN L , MD

Provider Gender: Male
License number: G28506
NPI: 1235154535
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OTIS, JOHN
5555 GROSSMONT CENTER
DR
LA MESA, CA 91942-3019
Phone: (858) 457-2180
Fax:
After Hours Phone: (858)
457-2180
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8851 CENTER DR STE 312
LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619)
515-2383
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
License number: 95004145

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J. Directorio de proveedores de salud mental

NPI: 1932566031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

PROCTOR, MELISSA S , CSW
Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

PROOSASELTS, YULIYA, MD
Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

RAMOS, ELIZABETH, CSW
Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

ROSENFARB, BARBARA, CSW
Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

SACHS, MELISSA R , CSW
Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

SEPULVEDA, JOE, MD
Provider Gender: Male
License number: A113283
NPI: 1306165402
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM SIPIN, ELVIRA P , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCS15308 <i>NPI:</i> 1477759892 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i>	Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM TONG, GARRICK, MD <i>Provider Gender:</i> Male <i>License number:</i> A102192 <i>NPI:</i> 1831361278 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish, Yue Chinese <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM TORRES, LAURA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 65059 <i>NPI:</i> 1568612943 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>
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J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
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After Hours Phone: (619) 515-2383
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
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www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

VILLAFANA, JOSE E , MFT

Provider Gender: Male
License number: 36841
NPI: 1831228824
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
VILLAFANA, JOSE
 8080 LA MESA BLVD STE 204
 LA MESA, CA 91942-0362
Phone: (619) 540-0700
Fax: (619) 462-1856
After Hours Phone: (619) 540-0700
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-6PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
License number: LCSW16118
NPI: 1902336837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
Phone: (619) 515-2383
Fax: (619) 269-0883
After Hours Phone: (619) 515-2383
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	<i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM
WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	WOOD, KEEGAN, NPA <i>Provider Gender:</i> Male <i>License number:</i> NP95006887 <i>NPI:</i> 1417471459 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8851 CENTER DR STE 312 LA MESA, CA 91942-3050 <i>Phone:</i> (619) 515-2383 <i>Fax:</i> (619) 269-0883 <i>After Hours Phone:</i> (619) 515-2383 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	YODER, BRENT E , CSW <i>Provider Gender:</i> Male <i>License number:</i> 9305 <i>NPI:</i> 1831184639 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> YODER, BRENT 8432 LEMON AVE LA MESA, CA 91941-5310
YALYSHAVA, VOLHA, CSW		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 447-7917
 Fax: (619) 447-7917
 After Hours Phone: (619) 447-7917
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No

Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 12PM-8PM, F 8AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
 License number: A136760
 NPI: 1508174970
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8851 CENTER DR STE 312
 LA MESA, CA 91942-3050
 Phone: (619) 515-2383
 Fax: (619) 269-0883
 After Hours Phone: (619) 515-2383
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LAKESIDE

ANDERSEN, CLAIRE, MD

Provider Gender: Female
 License number: 125942
 NPI: 1831418664
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW

Provider Gender: Female

License number: LCSW69175
 NPI: 1760867824
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BHAJU, JESHMIN, PSY

Provider Gender: Female
 License number: 31625
 NPI: 1497081566
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
 Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CALOCA, LAURA, PSY

Provider Gender: Female
 License number: 29757
 NPI: 1134364698
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CARLTON PENN, CORNELIA, PSY

Provider Gender: Female
 License number: PSY14310
 NPI: 1891720611
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
 License number: 11425

NPI: 1710060231
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
 License number: 28796
 NPI: 1114196987
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
 Phone: (619) 390-9975
 Fax: (858) 633-4690
 After Hours Phone: (619) 390-9975

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J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM CORVINI, NICOLAS, NPA <i>Provider Gender:</i> Male <i>License number:</i> 55107 <i>NPI:</i> 1194242461 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM COSTELLO, JENNIFER R , CSW <i>Provider Gender:</i> Female <i>License number:</i> 84174 <i>NPI:</i> 1619506250 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM EDE, KEKOA, MD <i>Provider Gender:</i> Male <i>License number:</i> A101211 <i>NPI:</i> 1134224843 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD	HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Nepali (Individual Language), Spanish <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM GOEHRING, KATHERINE R , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95002763 <i>NPI:</i> 1972929404 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NEIGHBORHOOD HEALTHCARE 10039 VINE ST LAKESIDE, CA 92040-3120 <i>Phone:</i> (619) 390-9975 <i>Fax:</i> (858) 633-4690 <i>After Hours Phone:</i> (619) 390-9975 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi,
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female

License number: 26883

NPI: 1194999276

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male

License number: PSY11197

NPI: 1740213487

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW

Provider Gender: Female

License number: LCSW28504

NPI: 1326272378

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female

License number: A115342

NPI: 1851602270

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

METZLER, CINDEA J , MFT

Provider Gender: Female
License number: LMFT38808
NPI: 1487690483
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: CINDEA J METZLER, LMFT
 10653 PALM ROW DR
 LAKESIDE, CA 92040-1638
Phone: (858) 254-6590
Fax:
After Hours Phone: (858) 254-6590
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: TU 7PM-8PM

MILLER BRUNETTO, HEIDI,

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J. Directorio de proveedores de salud mental

PSY

Provider Gender: Female
License number: PSY26809
NPI: 1023250453
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120

Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

POSTLETHWAITE, ALEJANDRA, MD

Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA
Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY
Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 10039 VINE ST
 LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619)
 390-9975
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Nepali (Individual Language),
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW
Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE

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J. Directorio de proveedores de salud mental

10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW
Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language),

Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY
Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
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Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY
Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA
Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
10039 VINE ST

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J. Directorio de proveedores de salud mental

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female

License number: 26963

NPI: 1639362494

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NEIGHBORHOOD

HEALTHCARE

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: (619) 390-9975

Fax: (858) 633-4690

After Hours Phone: (619)

390-9975

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Nepali (Individual Language),

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LEMON GROVE

ABDULLAH, KERI, PSY

Provider Gender: Female

License number: 29990

NPI: 1699840587

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW

Provider Gender: Female

License number: 74219

NPI: 1205946282

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

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J. Directorio de proveedores de salud mental

7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD

Provider Gender: Female
License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Accessibility information
Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
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LEMON GROVE, CA
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After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
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Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW
Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW
Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Phone: (619) 515-2338
Cultural Competency: Fax: (619) 702-8536
 FAMILY HEALTH CENTERS OF After Hours Phone: (619)
 SAN DIEGO 515-2338
 7592 BROADWAY Website:
 LEMON GROVE, CA www.beaconhealthoptions.com
 91945-1604
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

**BARTHOLOMEW, SARAH C ,
CSW**
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

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 Fax: (619) 702-8536
 After Hours Phone: (619)
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BENNETT, RACHEL Q , CSW
Provider Gender: Female
License number: 76466
NPI: 1558659797
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW
Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2338
 Fax: (619) 702-8536
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 515-2338
 Website:
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
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J. Directorio de proveedores de salud mental

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY

LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

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J. Directorio de proveedores de salud mental

Restrictions	<i>License number:</i> 82782	<i>Phone:</i> (619) 515-2338
<i>American Sign Language (ASL):</i>	<i>NPI:</i> 1598165441	<i>Fax:</i> (619) 702-8536
Yes	<i>Provider English Spoken:</i> Yes	<i>After Hours Phone:</i> (619)
Please contact provider for	<i>Provider Language(s) Spoken:</i>	515-2338
Accessibility information	<i>Cultural Competency:</i>	<i>Website:</i>
<i>Hours:</i> M-F 8:30AM-5PM	FAMILY HEALTH CENTERS OF	www.beaconhealthoptions.com
	SAN DIEGO	<i>Accepting New Patients:</i> Yes
CARINO DIOKNO, RHODA,	7592 BROADWAY	<i>Site English Spoken:</i> Yes
PSY	LEMON GROVE, CA	<i>Site Language(s) Spoken:</i>
<i>Provider Gender:</i> Female	91945-1604	American Sign Language, Farsi,
<i>License number:</i> 28073	<i>Phone:</i> (619) 515-2338	Japanese, Portuguese, Russian,
<i>NPI:</i> 1629109483	<i>Fax:</i> (619) 702-8536	Spanish, Yue Chinese
<i>Provider English Spoken:</i> Yes	<i>After Hours Phone:</i> (619)	<i>TDD:</i> No
<i>Provider Language(s) Spoken:</i>	515-2338	<i>Min/Max Age:</i> 0/99
<i>Cultural Competency:</i>	<i>Website:</i>	<i>Gender Restriction:</i> No Gender
FAMILY HEALTH CENTERS OF	www.beaconhealthoptions.com	Restrictions
SAN DIEGO	<i>Accepting New Patients:</i> Yes	<i>American Sign Language (ASL):</i>
7592 BROADWAY	<i>Site English Spoken:</i> Yes	Yes
LEMON GROVE, CA	<i>Site Language(s) Spoken:</i>	Please contact provider for
91945-1604	American Sign Language, Farsi,	Accessibility information
<i>Phone:</i> (619) 515-2338	Japanese, Portuguese, Russian,	<i>Hours:</i> M-F 8:30AM-5PM
<i>Fax:</i> (619) 702-8536	Spanish, Yue Chinese	
<i>After Hours Phone:</i> (619)	<i>TDD:</i> No	CHRISTENSEN, MELISSA,
515-2338	<i>Min/Max Age:</i> 0/99	CSW
<i>Website:</i>	<i>Gender Restriction:</i> No Gender	<i>Provider Gender:</i> Female
www.beaconhealthoptions.com	Restrictions	<i>License number:</i> 69616
<i>Accepting New Patients:</i> Yes	<i>American Sign Language (ASL):</i>	<i>NPI:</i> 1922313394
<i>Site English Spoken:</i> Yes	Yes	<i>Provider English Spoken:</i> Yes
<i>Site Language(s) Spoken:</i>	Please contact provider for	<i>Provider Language(s) Spoken:</i>
American Sign Language, Farsi,	Accessibility information	<i>Cultural Competency:</i>
Japanese, Portuguese, Russian,	<i>Hours:</i> M-F 8:30AM-5PM	FAMILY HEALTH CENTERS OF
Spanish, Yue Chinese		SAN DIEGO
<i>TDD:</i> No	CHEN, ANGELA, MFT	7592 BROADWAY
<i>Min/Max Age:</i> 0/99	<i>Provider Gender:</i> Female	LEMON GROVE, CA
<i>Gender Restriction:</i> No Gender	<i>License number:</i> LMFT40923	91945-1604
Restrictions	<i>NPI:</i> 1811027956	<i>Phone:</i> (619) 515-2338
<i>American Sign Language (ASL):</i>	<i>Provider English Spoken:</i> Yes	<i>Fax:</i> (619) 702-8536
Yes	<i>Provider Language(s) Spoken:</i>	<i>After Hours Phone:</i> (619)
Please contact provider for	<i>Cultural Competency:</i>	515-2338
Accessibility information	FAMILY HEALTH CENTERS OF	<i>Website:</i>
<i>Hours:</i> M-F 8:30AM-5PM	SAN DIEGO	www.beaconhealthoptions.com
	7592 BROADWAY	<i>Accepting New Patients:</i> Yes
CASTELLANOS, TERESITA D ,	LEMON GROVE, CA	<i>Site English Spoken:</i> Yes
CSW	91945-1604	<i>Site Language(s) Spoken:</i>
<i>Provider Gender:</i> Female		American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
DRISCOLL, MICHAEL S , CSW
Provider Gender: Male
License number: 93951
NPI: 1659761880
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
DUNFORD, KATELYN C , MFT
Provider Gender: Female
License number: 126626
NPI: 1437517497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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Fax: (619) 702-8536
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515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
DWYER, GEORGE, CSW
Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

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J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
**FAJARDO, JACQUELINE M ,
 CSW**
Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
FLORES, MARY LUPE, CSW
Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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 515-2338

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J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM FUKUI, TOMONORI, MD Provider Gender: Male License number: 75713 NPI: 1366519670 Provider English Spoken: Yes Provider Language(s) Spoken: Japanese, Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	NPI: 1174646301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
FRANCO, RODRIGO, CSW Provider Gender: Male License number: 71548 NPI: 1952736043 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM GALAPON, DIXIE L , PSY Provider Gender: Female License number: 16711	GAUD, KRISTINA G , MD Provider Gender: Female License number: 170667 NPI: 1508151598 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
License number: 13685
NPI: 1366641813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW

Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P, CSW
Provider Gender: Female
License number: 86166
NPI: 1356749949
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY
Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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American Sign Language, Farsi,
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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947

NPI: 1154811636

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
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Site Language(s) Spoken:

American Sign Language, Farsi,
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Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female

License number: 26598

NPI: 1134401805

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD

Provider Gender: Female

License number: A133711

NPI: 1174960686

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW

Provider Gender: Female

License number: 83712

NPI: 1194159384

Provider English Spoken: Yes

Provider Language(s) Spoken:

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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
License number: A167754
NPI: 1083092134
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493

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J. Directorio de proveedores de salud mental

NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
 License number: 25311
 NPI: 1558602490
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

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 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
 License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW

Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
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 Min/Max Age: 0/99
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J. Directorio de proveedores de salud mental

KEI, JUSTIN, MD <i>Provider Gender:</i> Male <i>License number:</i> A138266 <i>NPI:</i> 1396150041 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
KLOBERDANZ, KELSEY L , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95005293 <i>NPI:</i> 1235672502 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	KNIGHT, MARK ANTHONY, MD <i>Provider Gender:</i> Male <i>License number:</i> A94460 <i>NPI:</i> 1851573554 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes	KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female
License number: 161149
NPI: 1942662093
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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TDD: No
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Gender Restriction: No Gender
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American Sign Language (ASL):
Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333

NPI: 1619108511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MACMASTER, LINDSAY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 25570 <i>NPI:</i> 1659520179 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99	
MAHONEY, PATRICIA A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 22296 <i>NPI:</i> 1700200888 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>	MAIETTA, KATHLEEN H , CSW <i>Provider Gender:</i> Female <i>License number:</i> 88399 <i>NPI:</i> 1487128617 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338	

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken: American Sign Language
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I, MFT

Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken: American Sign Language
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604

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Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G, PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken: American Sign Language
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

License number: 79014

NPI: 1639403884

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY

Provider Gender: Female

License number: 25354

NPI: 1346472305

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female

License number: 29697

NPI: 1629453691

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

91945-1604

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
Farsi
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

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J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM OBRYAN, KELLY, PSY Provider Gender: Female License number: 24966 NPI: 1093882698 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	NPI: 1326296351 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
NWANGANGA, OKECHUKU R , CSW Provider Gender: Male License number: 27072 NPI: 1285984450 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99	OBRYAN, KELLY, PSY Provider Gender: Female License number: 24966 NPI: 1093882698 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604
OLIVER, ELIZABETH, CSW Provider Gender: Female License number: 66862	OLIVER, ELIZABETH, CSW Provider Gender: Female License number: 66862	

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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
 91945-1604
 Phone: (619) 515-2338
 Fax: (619) 702-8536
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 Website:
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
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 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 7592 BROADWAY
 LEMON GROVE, CA
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 Accepting New Patients: Yes
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW
Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female

License number: 76968

NPI: 1649760356

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female

License number: A113657

NPI: 1396986204

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA

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515-2338

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW
Provider Gender: Female
License number: LCS15308
NPI: 1477759892
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT
Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 7592 BROADWAY
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW
Provider Gender: Female
License number: 21573

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J. Directorio de proveedores de salud mental

NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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LEMON GROVE, CA
91945-1604
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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD
Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

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J. Directorio de proveedores de salud mental

TRIANA, JENNIFER, CSW <i>Provider Gender:</i> Female <i>License number:</i> 88589 <i>NPI:</i> 1073844460 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM WAUGH, BRANDON, CSW <i>Provider Gender:</i> Male <i>License number:</i> 83457 <i>NPI:</i> 1619459187 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes	<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM WEAVER, JHOSMARA A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 77233 <i>NPI:</i> 1982848594 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 7592 BROADWAY LEMON GROVE, CA 91945-1604 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for
TROYER, EMILY, PSY <i>Provider Gender:</i> Female <i>License number:</i> A149101 <i>NPI:</i> 1326484437 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes	

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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
License number: LCSW16118
NPI: 1902336837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
91945-1604
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
7592 BROADWAY
LEMON GROVE, CA
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Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
License number: NP95006887
NPI: 1417471459
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
7592 BROADWAY
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
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Hours: M-F 8:30AM-5PM

NATIONAL CITY

BAHENA, SANDRA, PSY

Provider Gender: Female
License number: 29792
NPI: 1073742268
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518

Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

BARI, MOHAMMED A , MD

Provider Gender: Male
License number: A46396
NPI: 1679588370
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619)
267-9257
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BARI, MOHAMMED A , MD

Provider Gender: Male
License number: A46396
NPI: 1679588370
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: PACIFIC HEALTH SYSTEMS LP
1908 SWEETWATER RD
NATIONAL CITY, CA
91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619) 327-0146
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Panjabi, Punjabi
Cultural Competency: PACIFIC HEALTH SYSTEMS LP
1908 SWEETWATER RD
NATIONAL CITY, CA
91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619) 327-0146
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
License number: A74848
NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Panjabi, Punjabi
Cultural Competency: PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619) 267-9257
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Panjabi, Punjabi
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BHATIA, PRAKASH K , MD

Provider Gender: Male
License number: A74848

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1164464137
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
**BHATIA HEALTH SERVICES A
 MEDICAL CORPORATION**
 2345 E 8TH ST STE 111
 NATIONAL CITY, CA
 91950-2861
Phone: (619) 267-9108
Fax: (619) 267-9273
After Hours Phone: (619)
 267-9108
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

BINDAL, ANKUR, MD
Provider Gender: Male
License number: A 132533
NPI: 1588820880
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Hindi, Panjabi, Punjabi
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
 1908 SWEETWATER RD
 NATIONAL CITY, CA
 91950-7628
Phone: (619) 327-0146
Fax: (619) 327-0150
After Hours Phone: (619)
 327-0146

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
 Panjabi, Punjabi
 TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 9AM-5PM

CABREJOS, CLAUDIO, MD
Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
**FAMILY HEALTH CENTERS OF
 SAN DIEGO**
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619)
 515-2399
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Portuguese, Spanish
 TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CARBONELL, SONIA, PSY
Provider Gender: Female
License number: 19752
NPI: 1902976343
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
**LA MAESTRA COMMUNITY
 HEALTH CENTERS**
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
 434-7308
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
 TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-6PM

**CARINO DIOKNO, RHODA,
 PSY**
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

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J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: (619) 515-2399

Fax: (619) 269-0199

After Hours Phone: (619)

515-2399

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Portuguese, Spanish

TDD: No

Min/Max Age: 19/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

YASHWANT CHAUDRI MD A

PROF CORP

3035 E 8TH ST

NATIONAL CITY, CA

91950-3026

Phone: (619) 596-9890

Fax: (619) 596-9893

After Hours Phone: (619)

596-9890

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TH 8AM-4PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

OPERATION SAMAHAN

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)

200-2426

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD

Provider Gender: Male

License number: A123312

NPI: 1700083391

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

OPERATION SAMAHAN

2743 HIGHLAND AVE

NATIONAL CITY, CA

91950-7410

Phone: (844) 200-2426

Fax: (858) 695-9074

After Hours Phone: (844)

200-2426

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU,TH,F

8:30AM-5:30PM, W 10AM-7PM

CUELLAR, BETHANY, MFT

Provider Gender: Female

License number: 79616

NPI: 1720388374

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

217 HIGHLAND AVE

NATIONAL CITY, CA

91950-1518

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J. Directorio de proveedores de salud mental

Phone: (619) 434-7308
 Fax: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-6PM

DIAZ, LIZETH, CSW

Provider Gender: Female
 License number: 97277
 NPI: 1124457023
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
 Phone: (619) 515-2399
 Fax: (619) 269-0199
 After Hours Phone: (619) 515-2399
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Portuguese, Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DOLNAK, DOUGLAS R , MD

Provider Gender: Male
 License number: 20A6059
 NPI: 1316147085
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 PACIFIC HEALTH SYSTEMS LP
 502 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2995
 Phone: (619) 327-0146
 Fax: (619) 327-0150
 After Hours Phone: (619) 327-0146
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
 Phone: (619) 515-2399
 Fax: (619) 269-0199
 After Hours Phone: (619) 515-2399
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Portuguese, Spanish
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1000 EUCLID AVE
 NATIONAL CITY, CA
 91950-3856
 Phone: (619) 515-2399
 Fax: (619) 269-0199
 After Hours Phone: (619) 515-2399
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male

License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619) 515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
License number: NP15657
NPI: 1790757623
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
OPERATION SAMAHAN
2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM HODGE, ROGER G , PSY <i>Provider Gender:</i> Male <i>License number:</i> 26148 <i>NPI:</i> 1306096714 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: OPERATION SAMAHAN 2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410 <i>Phone:</i> (844) 200-2426 <i>Fax:</i> (858) 695-9074 <i>After Hours Phone:</i> (844) 200-2426 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Hindi, Urdu TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM KUGEL, SAMUEL, MD <i>Provider Gender:</i> Male <i>License number:</i> A54412 <i>NPI:</i> 1497813968 <i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i> Portuguese, Spanish <i>Cultural Competency:</i> KUGEL, SAMUEL 502 EUCLID AVE STE 305 NATIONAL CITY, CA 91950-8901 <i>Phone:</i> (619) 472-2600 <i>Fax:</i> (619) 472-5700 <i>After Hours Phone:</i> (619) 472-2600 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Portuguese, Spanish TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-5:30PM, SA 8AM-1:30PM LIDSTONE, PAVEN, MD <i>Provider Gender:</i> Female <i>License number:</i> 161149 <i>NPI:</i> 1942662093 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 <i>Phone:</i> (619) 515-2399 <i>Fax:</i> (619) 269-0199 <i>After Hours Phone:</i> (619) 515-2399	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Portuguese, Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856 <i>Phone:</i> (619) 515-2399 <i>Fax:</i> (619) 269-0199 <i>After Hours Phone:</i> (619) 515-2399 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Portuguese, Spanish TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for
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J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

MAPLES, RANDI C , PSY

Provider Gender: Female
License number: 22630
NPI: 1023037561
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PACIFIC HEALTH SYSTEMS LP
610 EUCLID AVE STE 200
NATIONAL CITY, CA
91950-2951
Phone: (619) 267-9257
Fax: (619) 267-9273
After Hours Phone: (619)
267-9257
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE

NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619)
515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish

TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

MIRANDA, CYNTHIA, PSY

Provider Gender: Female
License number: 21188
NPI: 1023186970
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

NIDAY, TAKESHIA C , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A113548
 NPI: 1932429289
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 TAKESHIA NIDAY
 2345 E 8TH ST STE 111
 NATIONAL CITY, CA
 91950-2861
 Phone: (619) 267-9257
 Fax:
 After Hours Phone: (619)
 267-9257
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

REID, EMILY, NPA

Provider Gender: Female
 License number: 95002766
 NPI: 1083081467
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax: (619) 434-7308
 After Hours Phone: (619)
 434-7308

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-6PM

SALGUERO GALLAND, MARIO L, MD

Provider Gender: Male
 License number: A122101
 NPI: 1487947826
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax: (619) 434-7308
 After Hours Phone: (619)
 434-7308
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-6PM

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female
 License number: 95007730
 NPI: 1003159344
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518
 Phone: (619) 434-7308
 Fax: (619) 434-7308
 After Hours Phone: (619)
 434-7308
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-6PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO
1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856
Phone: (619) 515-2399
Fax: (619) 269-0199
After Hours Phone: (619)
515-2399
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Portuguese, Spanish
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TUCKER, MEGAN, PSY
Provider Gender: Female
License number: 27333
NPI: 1861877516
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
Phone: (619) 434-7308
Fax: (619) 434-7308
After Hours Phone: (619)
434-7308
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-6PM

OCEANSIDE

ACOSTA, AZUCENA, CSW
Provider Gender: Female
License number: 98304
NPI: 1255937496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F

8AM-5PM
ACOSTA, AZUCENA, CSW
Provider Gender: Female
License number: 98304
NPI: 1255937496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

ACOSTA, AZUCENA, CSW
Provider Gender: Female
License number: 98304
NPI: 1255937496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
 License number: 23734
 NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 7:30AM-6:30PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
 License number: 23734
 NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
 License number: 23734

NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760)
 966-3306
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

ALTAMIRANO, LEON, PSY

Provider Gender: Male
 License number: 23734
 NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 736-6767
 Fax: (760) 757-3004
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-7PM, TH-SA
 8AM-5PM

BRAILOW, ANTHONY G , PSY

Provider Gender: Male
 License number: 12521
 NPI: 1154356608
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BRAILOW, ANTHONY
 2181 S EL CAMINO REAL STE
 101
 OCEANSIDE, CA 92054-6267
 Phone: (760) 622-9662
 Fax: (760) 650-7363
 After Hours Phone: (760)
 622-9662
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/64
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: TU-SA 9:30AM-7:30PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
 License number: MFT19940
 NPI: 1487785705
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760)
 966-3306
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
 License number: MFT19940
 NPI: 1487785705
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:

NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BURCIAGA, HENRY, MFT

Provider Gender: Male
 License number: MFT19940
 NPI: 1487785705
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

CAI, SHEILA X , MD

Provider Gender: Female
 License number: C149845
 NPI: 1780625012
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
 License number: C149845

NPI: 1780625012
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
 Phone: (760) 736-6767
 Fax: (760) 757-3004
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
 License number: C149845
 NPI: 1780625012
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

CAI, SHEILA X , MD

Provider Gender: Female
 License number: C149845
 NPI: 1780625012
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Chinese
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760) 966-3306
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 7:30AM-8PM, SA 8AM-4:30PM	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 619 CROUCH ST STE 100 OCEANSIDE, CA 92054-4460 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 566-1501 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
CHALMERS, VIRGINIA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28053 <i>NPI:</i> 1265613715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 605 CROUCH ST OCEANSIDE, CA 92054-4415 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 757-3004 <i>After Hours Phone:</i> (760) 736-6767 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-W 8AM-7PM, TH-SA 8AM-5PM	CHALMERS, VIRGINIA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28053 <i>NPI:</i> 1265613715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354 <i>Phone:</i> (760) 736-6767 <i>Fax:</i> (760) 471-8946 <i>After Hours Phone:</i> (760) 736-6767	CHALMERS, VIRGINIA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28053 <i>NPI:</i> 1265613715 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 <i>Phone:</i> (760) 966-3306 <i>Fax:</i> (760) 966-3340 <i>After Hours Phone:</i> (760) 966-3306 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

YASHWANT CHAUDRI MD A
PROF CORP

520 N COAST HWY STE 103
OCEANSIDE, CA 92054-2184

Phone: (619) 596-9890

Fax: (619) 596-9893

After Hours Phone: (619)

596-9890

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,
Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M,TH 8AM-4PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male

License number: A67679

NPI: 1043258429

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi, Urdu

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-TH 8AM-7PM, F
8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male

License number: 22852

NPI: 1790122638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 7:30AM-6:30PM

CHENG, JIM, NPA

Provider Gender: Male

License number: 22852

NPI: 1790122638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male

License number: 22852

NPI: 1790122638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)
966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

CHENG, JIM, NPA

Provider Gender: Male

License number: 22852

NPI: 1790122638

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

605 CROUCH ST
OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax: (760) 757-3004

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male

License number: 20A9664

NPI: 1932359445

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5009
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male
License number: 20A9664
NPI: 1932359445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

CHRISTIANSON II, WARREN R , MD

Provider Gender: Male
License number: 20A9664
NPI: 1932359445
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

COOK, SHERYL G , PSY

Provider Gender: Female
License number: 15449
NPI: 1750420816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
**NORTH COUNTY HEALTH
 SERVICES**
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
 736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 7:30AM-6:30PM

CORNER, EMILY, MFT

Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH

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J. Directorio de proveedores de salud mental

SERVICES

619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-TH 7:30AM-6:30PM

CORNER, EMILY, MFT

Provider Gender: Female

License number: 102353

NPI: 1093225823

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female

License number: 102353

NPI: 1093225823

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

605 CROUCH ST

OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax: (760) 757-3004

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

CORNER, EMILY, MFT

Provider Gender: Female

License number: 102353

NPI: 1093225823

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)

966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for
Accessibility information

Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

CORTIZO, ROSA, PSY

Provider Gender: Female

License number: 22278

NPI: 1952316648

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760)

736-6767

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J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORTIZO, ROSA, PSY
Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM
CORTIZO, ROSA, PSY
Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

CORTIZO, ROSA, PSY
Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH

SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

CRUZ, VANESSA, CSW
Provider Gender: Female
License number: 87166
NPI: 1285170662
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female
License number: 87166
NPI: 1285170662
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female
License number: 87166
NPI: 1285170662
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female
License number: 55982
NPI: 1437162898
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female
License number: 55982
NPI: 1437162898
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female
 License number: 55982
 NPI: 1437162898
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
 License number: 18451
 NPI: 1497727820
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
 Phone: (760) 631-5009
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5009
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
 License number: 18451
 NPI: 1497727820
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
 License number: 18451
 NPI: 1497727820
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
License number: 26686
NPI: 1003194960
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767

Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 7:30AM-6:30PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W 8AM-7PM, TH-SA
 8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW

Provider Gender: Female
License number: 91462
NPI: 1790144756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 7:30AM-6:30PM

GARCIA, JANET A , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 91462
 NPI: 1790144756
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GARCIA, JANET A , CSW
 Provider Gender: Female
 License number: 91462
 NPI: 1790144756
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760)
 966-3306

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

GEORGIEV, MARY JO C , PSY
 Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for

Accessibility information
 Hours: M-F 8AM-5PM
GEORGIEV, MARY JO C , PSY
 Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COGNITIVE HEALTH
 SOLUTIONS INC
 2131 S EL CAMINO REAL STE
 102
 OCEANSIDE, CA 92054-6217
 Phone: (858) 227-0887
 Fax: (858) 430-9611
 After Hours Phone: (858)
 227-0887
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 9AM-6PM

GEORGIEV, MARY JO C , PSY
 Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 736-6767
 Fax: (760) 757-3004
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-W 8AM-7PM, TH-SA
 8AM-5PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 7:30AM-6:30PM

GEORGIEV, MARY JO C , PSY

Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760)
 966-3306
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 7:30AM-8PM, SA
 8AM-4:30PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
 License number: 25138
 NPI: 1063800217
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760)
 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 7:30AM-6:30PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
 License number: 25138
 NPI: 1063800217
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 NORTH COUNTY HEALTH
 SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760)
 966-3306
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female

License number: 25138

NPI: 1063800217

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760) 736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female

License number: 101690

NPI: 1457786774

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female

License number: 101690

NPI: 1457786774

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female

License number: 101690

NPI: 1457786774

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female

License number: 88306

NPI: 1568918647

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female

License number: 88306

NPI: 1568918647

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760) 631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GODINEZ, BRENDA, CSW

Provider Gender: Female

License number: 88306

NPI: 1568918647

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

GONZALEZ, JOSE, CSW

Provider Gender: Male

License number: 80920

NPI: 1689844847

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

619 CROUCH ST STE 100

OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

GONZALEZ, JOSE, CSW

Provider Gender: Male
 License number: 80920
 NPI: 1689844847
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

GONZALEZ, JOSE, CSW

Provider Gender: Male
 License number: 80920
 NPI: 1689844847

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760) 966-3306
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
 License number: LCSW86435
 NPI: 1356777361
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
 License number: LCSW86435
 NPI: 1356777361
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

GUEVARA LEHMAN, NATALIE,

CSW
Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency: VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female

License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency: VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency: VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

HARDIN INGRAM, ANDREA, CSW

Provider Gender: Female
License number: 28677
NPI: 1801947692
Provider English Spoken: Yes
Provider Language(s) Spoken: COGNITIVE HEALTH SOLUTIONS INC
 2131 S EL CAMINO REAL STE 102
 OCEANSIDE, CA 92054-6217
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-6PM

ISACESCU, VALENTIN, MD

Provider Gender: Male
 License number: A68103
 NPI: 1972602720
 Provider English Spoken: Yes
 Provider Language(s) Spoken: French, Romanian
 Cultural Competency: No
 ISACESCU, VALENTIN
 2122 S EL CAMINO REAL STE 100
 OCEANSIDE, CA 92054-6209
 Phone: (760) 726-6464
 Fax: (760) 726-6483
 After Hours Phone: (760) 726-6464
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: French, Romanian
 TDD: No

Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 11AM-4PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
 License number: 23183

NPI: 1639687726
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Tamil, Telugu
 Cultural Competency: VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
 License number: 23183
 NPI: 1639687726
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Tamil, Telugu
 Cultural Competency: VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5009
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
 License number: 23183
 NPI: 1639687726
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Hindi, Tamil, Telugu
 Cultural Competency: VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 7:30AM-6:30PM

KISTLER, JONATHAN, MD

Provider Gender: Male
License number: A73938
NPI: 1033161740
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1738 S TREMONT ST
OCEANSIDE, CA 92054-5309
Phone: (760) 439-2800
Fax: (760) 433-5031
After Hours Phone: (760)
439-2800
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken:
Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male
License number: 25077
NPI: 1215233028
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

MEYERHOF, GRETA, MFT

Provider Gender: Female
License number: 32299
NPI: 1487196333
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female
License number: 32299
NPI: 1487196333
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female
License number: 32299
NPI: 1487196333
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869

NPI: 1396047809

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)

966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

MONTEZ, REBECCA, CSW

Provider Gender: Female

License number: 26869

NPI: 1396047809

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

NORTH COUNTY HEALTH
SERVICES

619 CROUCH ST STE 100

OCEANSIDE, CA 92054-4460

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 7:30AM-6:30PM

NAVA, PETER B , NPA

Provider Gender: Male

License number: 95016584

NPI: 1689251571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

NAVA, PETER B , NPA

Provider Gender: Male

License number: 95016584

NPI: 1689251571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

NAVA, PETER B , NPA

Provider Gender: Male
License number: 95016584
NPI: 1689251571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken:

Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
 License number: 95016129
 NPI: 1245733450
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760) 966-3306
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female

License number: 95016129
 NPI: 1245733450
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
 License number: 95016129
 NPI: 1245733450
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
 License number: 28885
 NPI: 1710110416
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-TH 7:30AM-6:30PM

SIMPSON, ERIC, PSY

Provider Gender: Male

License number: 28885

NPI: 1710110416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

3220 MISSION AVE STE 1

OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male

License number: 28885

NPI: 1710110416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

605 CROUCH ST

OCEANSIDE, CA 92054-4415

Phone: (760) 736-6767

Fax: (760) 757-3004

After Hours Phone: (760)

736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male

License number: 28885

NPI: 1710110416

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

2210 MESA DR STE 300

OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306

Fax: (760) 966-3340

After Hours Phone: (760)

966-3306

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

SMITH, SONYA L , CSW

Provider Gender: Female

License number: 82598

NPI: 1902070857

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

SMITH, SONYA L , CSW

Provider Gender: Female

License number: 82598

NPI: 1902070857

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SMITH, SONYA L , CSW
Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SUNDER, RAJAGOPAL K , MD
Provider Gender: Male
License number: 94223
NPI: 1972572824
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency:
COGNITIVE HEALTH
SOLUTIONS INC
2131 S EL CAMINO REAL STE
102
OCEANSIDE, CA 92054-6217
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 9AM-6PM

SWENSON, ING E , CSW
Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SWENSON, ING E , CSW
Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
605 CROUCH ST
OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 736-6767 Fax: (760) 471-8946 After Hours Phone: (760) 736-6767 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM	American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 7:30AM-6:30PM	Spanish Cultural Competency: NORTH COUNTY HEALTH SERVICES 619 CROUCH ST STE 100 OCEANSIDE, CA 92054-4460 Phone: (760) 736-6767 Fax: (760) 566-1501 After Hours Phone: (760) 736-6767 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-TH 7:30AM-6:30PM
TAYLOR, CORRDERO A , CSW Provider Gender: Male License number: 71284 NPI: 1346501533 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish, Chinese Cultural Competency: NORTH COUNTY HEALTH SERVICES 619 CROUCH ST STE 100 OCEANSIDE, CA 92054-4460 Phone: (760) 736-6767 Fax: (760) 566-1501 After Hours Phone: (760) 736-6767 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions	TORRES, HECTOR M , PSY Provider Gender: Male License number: 13309 NPI: 1720265614 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: NORTH COUNTY HEALTH SERVICES 605 CROUCH ST OCEANSIDE, CA 92054-4415 Phone: (760) 736-6767 Fax: (760) 757-3004 After Hours Phone: (760) 736-6767 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-W 8AM-7PM, TH-SA 8AM-5PM	TORRES, HECTOR M , PSY Provider Gender: Male License number: 13309 NPI: 1720265614 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: NORTH COUNTY HEALTH SERVICES 2210 MESA DR STE 300 OCEANSIDE, CA 92054-3701 Phone: (760) 966-3306 Fax: (760) 966-3340 After Hours Phone: (760) 966-3306 Website: www.beaconhealthoptions.com Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354

Phone: (760) 736-6767

Fax: (760) 471-8946

After Hours Phone: (760) 736-6767

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

TOUSI, SARA, CSW

Provider Gender: Female

License number: 89177

NPI: 1508427899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057-6043

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

TOUSI, SARA, CSW

Provider Gender: Female

License number: 89177

NPI: 1508427899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

818 PIER VIEW WAY

OCEANSIDE, CA 92054-2803

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

TOUSI, SARA, CSW

Provider Gender: Female

License number: 89177

NPI: 1508427899

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

517 N HORNE ST

OCEANSIDE, CA 92054-2518

Phone: (760) 631-5009

Fax: (760) 414-3892

After Hours Phone: (760)

631-5009

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 8AM-7PM, F 8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female
 License number: 93945
 NPI: 1659898641
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 3220 MISSION AVE STE 1
 OCEANSIDE, CA 92058-1354
 Phone: (760) 736-6767
 Fax: (760) 471-8946
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

VETTER, JEAN L , CSW

Provider Gender: Female
 License number: 93945

NPI: 1659898641
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
 Phone: (760) 966-3306
 Fax: (760) 966-3340
 After Hours Phone: (760) 966-3306
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

VETTER, JEAN L , CSW

Provider Gender: Female
 License number: 93945
 NPI: 1659898641
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
 Phone: (760) 736-6767
 Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 7:30AM-6:30PM

WALKER, SHAYNA T , MD

Provider Gender: Female
 License number: A107393
 NPI: 1760688295
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
 Phone: (760) 736-6767
 Fax: (760) 757-3004
 After Hours Phone: (760) 736-6767
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-W 8AM-7PM, TH-SA
8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
619 CROUCH ST STE 100
OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 7:30AM-6:30PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
2210 MESA DR STE 300
OCEANSIDE, CA 92054-3701

Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760)
966-3306
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 7:30AM-8PM, SA
8AM-4:30PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH
SERVICES
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: (760) 736-6767
Fax: (760) 471-8946
After Hours Phone: (760)
736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NORTH COUNTY HEALTH SERVICES
 619 CROUCH ST STE 100
 OCEANSIDE, CA 92054-4460
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 7:30AM-6:30PM

WELCH, MEGAN, MFT
Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 605 CROUCH ST
 OCEANSIDE, CA 92054-4415
Phone: (760) 736-6767
Fax: (760) 757-3004
After Hours Phone: (760) 736-6767
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W 8AM-7PM, TH-SA 8AM-5PM

WELCH, MEGAN, MFT
Provider Gender: Female
License number: 113763
NPI: 1689117400
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 2210 MESA DR STE 300
 OCEANSIDE, CA 92054-3701
Phone: (760) 966-3306
Fax: (760) 966-3340
After Hours Phone: (760) 966-3306
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 7:30AM-8PM, SA 8AM-4:30PM

WILFONG, EDWARD J , PSY
Provider Gender: Male

License number: 9970
NPI: 1215386248
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

WILFONG, EDWARD J , PSY
Provider Gender: Male
License number: 9970
NPI: 1215386248
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760)
631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

WOODEN, FEEBY J , PSY

Provider Gender: Female
License number: PSY26436
NPI: 1013035252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency:
WOODEN, FEEBY
3355 MISSION AVE STE 111
OCEANSIDE, CA 92058-1327
Phone: (760) 810-1440
Fax: (760) 444-3297
After Hours Phone: (760)
810-1440
Website:
www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 10AM-7PM, SA 10AM-2PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 517 N HORNE ST
 OCEANSIDE, CA 92054-2518
Phone: (760) 631-5009
Fax: (760) 414-3892
After Hours Phone: (760) 631-5009
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-TH 8AM-7PM, F 8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 VISTA COMMUNITY CLINIC
 4700 N RIVER RD
 OCEANSIDE, CA 92057-6043
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

VISTA COMMUNITY CLINIC
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054-2803
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

POWAY

ANDERSEN, CLAIRE, MD

Provider Gender: Female
License number: 125942
NPI: 1831418664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BELINSKY, MARIA T , CSW
Provider Gender: Female
License number: LCSW69175
NPI: 1760867824
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM
BHAJU, JESHMIN, PSY
Provider Gender: Female
License number: 31625
NPI: 1497081566
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Nepali (Individual Language)
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM
CALOCA, LAURA, PSY
Provider Gender: Female
License number: 29757
NPI: 1134364698
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM
CARLTON PENN, CORNELIA, PSY
Provider Gender: Female
License number: PSY14310
NPI: 1891720611
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CELAYA, MARY, NPA

Provider Gender: Female
License number: 11425
NPI: 1710060231
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAO, BRIAN, PSY

Provider Gender: Male
License number: 28796
NPI: 1114196987
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CORVINI, NICOLAS, NPA

Provider Gender: Male
License number: 55107
NPI: 1194242461
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520

Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COSTELLO, JENNIFER R , CSW

Provider Gender: Female
License number: 84174
NPI: 1619506250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

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J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

EDE, KEKOA, MD

Provider Gender: Male
License number: A101211
NPI: 1134224843
Provider English Spoken: Yes
Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GOEHRING, KATHERINE R , NPA

Provider Gender: Female
License number: 95002763

NPI: 1972929404
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

GUARDADO SOTO, RAQUEL E , PSY

Provider Gender: Female
License number: 26883
NPI: 1194999276
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520

Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HOLDEN, MATTHEW, PSY

Provider Gender: Male
License number: PSY11197
NPI: 1740213487
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

KLEAST, RUTH A , CSW

Provider Gender: Female
License number: LCSW28504
NPI: 1326272378
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

LIU-BARBARO, DOROTHY, MD

Provider Gender: Female
License number: A115342
NPI: 1851602270
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MACIAS, ZIRLEY, CSW

Provider Gender: Female
License number: 96997
NPI: 1245616887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MAGOS, DANIEL, CSW

Provider Gender: Male
License number: 88270
NPI: 1578983664
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MEJIAS, JUAN C , PSY

Provider Gender: Male
License number: 26953
NPI: 1558560730
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PEDERSEN, SUESAN, MD

Provider Gender: Female
License number: A138369
NPI: 1558603837
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520

Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

POSTLETHWAITE,

ALEJANDRA, MD
Provider Gender: Female
License number: A88938
NPI: 1750566915
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

RODARTE, GABRIEL, MD

Provider Gender: Male
License number: A87906
NPI: 1184649212
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ROSS, ANNE T , NPA

Provider Gender: Female
License number: 53359

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1447334883
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SINGH, PARDEEP, NPA
Provider Gender: Female
License number: 95010750
NPI: 1992279004
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

STONE, CALVIN, MD
Provider Gender: Male
License number: 20A18127
NPI: 1275995870
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No

Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SUOZZO, JOSEPH J , PSY
Provider Gender: Male
License number: 18393
NPI: 1821013228
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

TEETER-WITT, ALYSSA, PSY
Provider Gender: U
License number: 31075
NPI: 1932308442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NEIGHBORHOOD
 HEALTHCARE

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J. Directorio de proveedores de salud mental

13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMAS, PAULA M , CSW

Provider Gender: Female
License number: 29517
NPI: 1821389966
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

THOMPSON, STEPHANIE G , CSW

Provider Gender: Female
License number: 75185
NPI: 1861938227
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VALLEZ BARLAM, ANDREA, PSY

Provider Gender: Female
License number: PSY9962
NPI: 1710902143
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520
Phone: (858) 218-3000
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
TDD: Yes
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

VAQUERO, JUANA, PSY

Provider Gender: Female
License number: PSY28364
NPI: 1023459708
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NEIGHBORHOOD HEALTHCARE
13010 POWAY RD
POWAY, CA 920644520

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
 License number: 19664
 NPI: 1578865549
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish

TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WOODWORTH, JENNIFER, PSY

Provider Gender: Female
 License number: 26963
 NPI: 1639362494
 Provider English Spoken: Yes
 Provider Language(s) Spoken: NEIGHBORHOOD HEALTHCARE
 13010 POWAY RD
 POWAY, CA 920644520
 Phone: (858) 218-3000
 Fax: (858) 633-4688
 After Hours Phone: (858) 218-3000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Nepali (Individual Language), Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

POWAY

JACKSON, VIOLETTE A , CSW
 Provider Gender: Female
 License number: 15995
 NPI: 1275640195
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency: VIOLETTE JACKSON
 15525 POMERADO RD STE E4
 POWAY, CA 92064-2427
 Phone: (858) 674-5958
 Fax: (858) 451-1104
 After Hours Phone: (858) 674-5958
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: TU 9AM-7:30PM, W 9AM-6PM, TH 9AM-8PM

RAMONA

ALTAMIRANO, LEON, PSY
 Provider Gender: Male
 License number: 23734
 NPI: 1619271517
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 789-1223
 Fax: (760) 789-5946
 After Hours Phone: (760) 789-1223
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-12PM

ARANGO, MONICA, PSY

Provider Gender: Female
 License number: 28316
 NPI: 1225090616
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
 Phone: (760) 789-1223
 Fax: (760) 789-5946
 After Hours Phone: (760) 789-1223
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-12PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
 License number: 28053
 NPI: 1265613715
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
 Phone: (760) 789-1223
 Fax: (760) 789-5946
 After Hours Phone: (760) 789-1223
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-12PM

CHENG, JIM, NPA

Provider Gender: Male
 License number: 22852
 NPI: 1790122638

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
 Phone: (760) 789-1223
 Fax: (760) 789-5946
 After Hours Phone: (760) 789-1223
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-12PM

CORNER, EMILY, MFT

Provider Gender: Female
 License number: 102353
 NPI: 1093225823
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
 Phone: (760) 789-1223
 Fax: (760) 789-5946
 After Hours Phone: (760) 789-1223
 Website:
 www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

CORTIZO, ROSA, PSY

Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: M-F 8AM-5PM, SA 8AM-12PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
License number: 26184
NPI: 1477785137
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

FREEMAN, WANDA, NPA

Provider Gender: Female
License number: 95003903
NPI: 1659504264
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES

217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GEORGIEV, MARY JO C, PSY

Provider Gender: Female
License number: 17954
NPI: 1518996875
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

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J. Directorio de proveedores de salud mental

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GERAUGHTY (OLEARY), PAMELA J , CSW

Provider Gender: Female
License number: 25138
NPI: 1063800217
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GUEVARA LEHMAN, NATALIE, CSW

Provider Gender: Female
License number: 63746
NPI: 1578835757
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

GUTIERREZ, VERONICA, PSY

Provider Gender: Female
License number: 21413
NPI: 1467674176
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589

Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

JENSEN, BRIAN M , PSY

Provider Gender: Male
License number: 26041
NPI: 1518138049
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender

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J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM KRAPES, MICHAEL B , PSY <i>Provider Gender:</i> Male <i>License number:</i> 25077 <i>NPI:</i> 1215233028 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM MONTEZ, REBECCA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 26869 <i>NPI:</i> 1396047809 <i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM SIMPSON, ERIC, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28885 <i>NPI:</i> 1710110416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-12PM SIMPSON, ERIC, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28885 <i>NPI:</i> 1710110416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA
SIMMONS, SUZANNE, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95016129 <i>NPI:</i> 1245733450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com	SIMPSON, ERIC, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28885 <i>NPI:</i> 1710110416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA	SIMPSON, ERIC, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28885 <i>NPI:</i> 1710110416 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: NORTH COUNTY HEALTH SERVICES 217 EARLHAM ST RAMONA, CA 92065-1589 <i>Phone:</i> (760) 789-1223 <i>Fax:</i> (760) 789-5946 <i>After Hours Phone:</i> (760) 789-1223 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA

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J. Directorio de proveedores de salud mental

8AM-12PM

SINNAPPAN, CHRISTOPHER A , MD

Provider Gender: Male
License number: G85649
NPI: 1588740252
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male
License number: 71284
NPI: 1346501533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST

RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

TORRES, HECTOR M , PSY

Provider Gender: Male
License number: 13309
NPI: 1720265614
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

WALKER, SHAYNA T , MD

Provider Gender: Female
License number: A107393
NPI: 1760688295
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 217 EARLHAM ST
 RAMONA, CA 92065-1589
Phone: (760) 789-1223
Fax: (760) 789-5946
After Hours Phone: (760) 789-1223
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-12PM

SANTA YSABEL

GERNANDT, DEBRA J , MFT

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 50395
NPI: 1538292115
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 GERNANDT, DEBRA
 30240 HIGHWAY 78
 SANTA YSABEL, CA 920700231
Phone: (760) 765-3578
Fax: (760) 765-2810
After Hours Phone: (760)
 765-3578
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M,TU 9AM-7PM, W,F
 9AM-6PM, SA 10AM-5PM

HAWTHORNE, KAREN, MFT

Provider Gender: Female

License number: 16894

NPI: 1750449625

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

HAWTHORNE, KAREN

30240 HIGHWAY 78

SANTA YSABEL, CA 920700035

Phone: (760) 765-3578

Fax: (760) 765-2810

After Hours Phone: (760)

765-3578

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information

Hours: M 1PM-6PM, TU

10AM-6PM, W,TH 9AM-7PM, F

10AM-4PM, SA

12:30PM-3:30PM

SAN DIEGO

ABDULLAH, KERI, PSY

Provider Gender: Female

License number: 29990

NPI: 1699840587

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY

Provider Gender: Female

License number: 29990

NPI: 1699840587

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
 SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information

Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY

Provider Gender: Female

License number: 29990

NPI: 1699840587

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM
ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ABDULLAH, KERI, PSY
 Provider Gender: Female
 License number: 29990
 NPI: 1699840587
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ABERCROMBIE, SHERI L , PSY
 Provider Gender: Female
 License number: 18536
 NPI: 1932292422
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858) 810-8787
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-1PM

AGUILAR, DIANA, CSW

Provider Gender: Female
 License number: 83063
 NPI: 1194065813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

AGUIRRE, LEAH B , CSW
 Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

AGUIRRE, LEAH B , CSW

Provider Gender: Female

License number: 74440

NPI: 1306151998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

AGUIRRE, LEAH B , CSW
 Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, LEAH B , CSW
 Provider Gender: Female
 License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, LEAH B , CSW
 Provider Gender: Female

License number: 74440
 NPI: 1306151998
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AGUIRRE, WENDY, CSW
 Provider Gender: Female
 License number: 74219
 NPI: 1205946282
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AGUIRRE, WENDY, CSW
Provider Gender: Female
License number: 74219
NPI: 1205946282
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

ALAVI, ALI S , MD
Provider Gender: Male
License number: A163793
NPI: 1356856694
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

ALFARO, AMY, CSW
Provider Gender: Female
License number: 72874
NPI: 1609326859
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD
Provider Gender: Male
License number: G36206
NPI: 1457371635
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619) 515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

Hours: M-F 8AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5:30PM	License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105-1609 Phone: (619) 285-7097 Fax: (619) 564-8140 After Hours Phone: (619) 285-7097 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 19/64 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:
ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: (619) 280-4213 Fax: (619) 281-6738 After Hours Phone: (619) 280-4213 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No	ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	ANDERSON, NICOLE M , CSW Provider Gender: Female License number: LCSW28443 NPI: 1679766380 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300
ALVAREZ, DIANA P , CSW Provider Gender: Female License number: 81025 NPI: 1013200617 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish TDD: No	ALVAREZ, DIANA P , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	<i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM	SERVICES, PC 750 B ST STE 2870 SAN DIEGO, CA 92101-8132 <i>Phone:</i> (619) 722-0014 <i>Fax:</i> (619) 327-4174 <i>After Hours Phone:</i> (619) 722-0014 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-5PM
ANDERSON, NICOLE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW28443 <i>NPI:</i> 1679766380 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions	ANDERSON, NICOLE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW28443 <i>NPI:</i> 1679766380 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> ANDERSON, NICOLE 6136 MISSION GORGE RD STE 106 SAN DIEGO, CA 92120-3413 <i>Phone:</i> (619) 786-1351 <i>Fax:</i> <i>After Hours Phone:</i> (619) 786-1351 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> W 5PM-9PM	ANGER, ALEXANDRA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95007806 <i>NPI:</i> 1780042002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
	ANDREWS GEYMAN, JOY, PSY <i>Provider Gender:</i> Female <i>License number:</i> 15492 <i>NPI:</i> 1336243013 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> ACCESS PSYCHOLOGY	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	License number: A139241 NPI: 1114347291 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM
ARAGON, DARINKA M , MD Provider Gender: Female License number: A139241 NPI: 1114347291 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	ARAGON, DARINKA M , MD Provider Gender: Female License number: A139241 NPI: 1114347291 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104	ARAGON, DARINKA M , MD Provider Gender: Female License number: A139241 NPI: 1114347291 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female

License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female

License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ARAGON, DARINKA M , MD
 Provider Gender: Female
 License number: A139241
 NPI: 1114347291
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ARIELLA, LYNDIA R , PSY
 Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female

License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

ARIELLA, LYNDIA R , PSY

Provider Gender: Female
 License number: 19450
 NPI: 1073518965
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 19450 NPI: 1073518965 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
ARIELLA, LYNDIA R , PSY Provider Gender: Female License number: 19450 NPI: 1073518965 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	ARIELLA, LYNDIA R , PSY Provider Gender: Female License number: 19450 NPI: 1073518965 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715	ARONLEE, TRACY S , CSW Provider Gender: Female License number: 83778 NPI: 1619304748 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 Phone: (858) 810-8787 Fax: (858) 279-0377 After Hours Phone: (858) 810-8787 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-1PM

ARONLEE, TRACY S , CSW

Provider Gender: Female
License number: 83778
NPI: 1619304748
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

ARSENAULT, DARIN J , PSY

Provider Gender: Male
License number: 24775
NPI: 1528243821

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-TH 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASUNCION, JENNIFER, CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

ASUNCION, JENNIFER, CSW
Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

ATALLAH, HANI M , MD
Provider Gender: Male
License number: 132530
NPI: 1104169655
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

AUCOIN, DOUGLAS, CSW
Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
License number: 24707
NPI: 1699007609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

AVILA, RADOMIR M , CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
License number: 75520
NPI: 1487937330
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male

License number: 75520

NPI: 1487937330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male

License number: 75520

NPI: 1487937330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male

License number: 75520

NPI: 1487937330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BABBITT, CLAIRE M , MFT

Provider Gender: Female

License number: 88233

NPI: 1306219936

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

BABBITT, CLAIRE

16870 W BERNARDO DR STE
400

SAN DIEGO, CA 92127-1678

Phone: (858) 449-7547

Fax:

After Hours Phone: (858)

449-7547

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 19/64

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-SA 6:30AM-7PM

BAHENA, SANDRA, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 29792
NPI: 1073742268
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

BAHENA, SANDRA, PSY
Provider Gender: Female
License number: 29792
NPI: 1073742268
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609

Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

BAHRO, SONIA A , PSY
Provider Gender: Female
License number: 22039
NPI: 1750418042
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 ACCESS PSYCHOLOGY SERVICES, PC
 750 B ST STE 2870
 SAN DIEGO, CA 92101-8132
Phone: (619) 722-0014
Fax: (619) 327-4174
After Hours Phone: (619) 722-0014
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

BALINGIT, KATRINA T , NPA
Provider Gender: Female
License number: NP95012642
NPI: 1538790605
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

BANZON, CHARLES, MFT
Provider Gender: Male
License number: 49126
NPI: 1457422966
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

BANZON, CHARLES, MFT

Provider Gender: Male
License number: 49126
NPI: 1457422966
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM
BARCELOS ANTONIO, TIAGO, CSW
Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM
BARCELOS ANTONIO, TIAGO, CSW
Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male
License number: 90529
 NPI: 1194159871
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BARMAK, SHANT, PSY

Provider Gender: Male
License number: 24998
 NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Armenian
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
Phone: (619) 445-6200
Fax: (619) 238-5551
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
 TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BARMAK, SHANT, PSY

Provider Gender: Male
License number: 24998
 NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Armenian
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BARRATT, REBEKAH A , PSY

Provider Gender: Female
License number: 23471
 NPI: 1609060276

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO AMERICAN INDIAN
 HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619)
 234-2158
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

BARTHOLOMEW, SARAH C , CSW
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM
BARTHOLOMEW, SARAH C , CSW
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
BARTHOLOMEW, SARAH C , CSW
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

**BARTHOLOMEW, SARAH C ,
 CSW**
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

**BARTHOLOMEW, SARAH C ,
 CSW**
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

**BARTHOLOMEW, SARAH C ,
 CSW**
Provider Gender: Female
License number: 86542
NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

**BARTHOLOMEW, SARAH C ,
 CSW**
Provider Gender: Female
License number: 86542

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1720339708
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BASS, GURGIANA, PSY
Provider Gender: Female
License number: 24750
NPI: 1639325277
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858)
 810-8787

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-1PM

BASS, GURGIANA, PSY
Provider Gender: Female
License number: 24750
NPI: 1639325277
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
 810-8700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

BAYLON, ALDO, PSY
Provider Gender: Male
License number: PSY29904
NPI: 1649429150
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

BAZZETTA, JAMES J , PSY
Provider Gender: Male
License number: 24443
NPI: 1619162609
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
233-8500
Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

BENNETT, CATHERINE V , MFT

Provider Gender: Female

License number: 18154

NPI: 1861577967

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

BENNETT, KATE

9655 GRANITE RIDGE DR STE
200-0027

SAN DIEGO, CA 92123-2674

Phone: (619) 823-0204

Fax: (858) 459-2128

After Hours Phone: (619)

823-0204

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	BENNETT, RACHEL Q , CSW <i>Provider Gender:</i> Female <i>License number:</i> 76466 <i>NPI:</i> 1558659797 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM
BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
BENNETT, RACHEL Q , CSW Provider Gender: Female License number: 76466 NPI: 1558659797 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	BENZL, JERRY F , MD Provider Gender: Male License number: A154471 NPI: 1487032082 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120
	BERKSON, BARRIE, CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W, F 8:30AM-5PM
BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619) 515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 95013060 NPI: 1265929442 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 Phone: (858) 810-8700 Fax: (858) 633-4680 After Hours Phone: (858) 810-8700 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM
BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	BERKSON, BARRIE, CSW Provider Gender: Female License number: 63313 NPI: 1922305465 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	BHATIA, PRAKASH K , MD Provider Gender: Male License number: A74848 NPI: 1164464137 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: PACIFIC HEALTH SYSTEMS LP 6655 ALVARADO RD SAN DIEGO, CA 92120-5208 Phone: (619) 287-3270 Fax: (619) 267-9273 After Hours Phone: (619) 287-3270
BESTERFIELD, LYDIA, NPA Provider Gender: Female	BESTERFIELD, LYDIA, NPA Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD
Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female

License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
 License number: 20A11387
 NPI: 1639308265
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BONDELL, JAMES A , PSY

Provider Gender: Male
 License number: 4842
 NPI: 1558456046
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 BONDELL, JAMES
 2477 CONGRESS ST
 SAN DIEGO, CA 92110-2820
 Phone: (760) 729-4931
 Fax: (760) 729-3846
 After Hours Phone: (760) 729-4931
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: TU,TH 9AM-7:30PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes

Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
 License number: PSY25805
 NPI: 1881927184
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours:

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male

License number: PSY25805

NPI: 1881927184

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
License number: 95005019
NPI: 1184012866
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA
 Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

BORREGO, DIANA E , NPA
 Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA
 Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BORREGO, DIANA E , NPA

Provider Gender: Female
 License number: 95005019
 NPI: 1184012866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BOUCHER, DAVID A , PSY

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 14085
NPI: 1518966340
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BOUCHER, DAVID
3760 CONVOY ST STE 118
SAN DIEGO, CA 92111-3743
Phone: (619) 296-8097
Fax: (619) 260-1036
After Hours Phone: (619)
296-8097
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: W,TH 8AM-7PM

BOULES, FADY S , NPA

Provider Gender: Male
License number: 95003306
NPI: 1639541022
Provider English Spoken: Yes
Provider Language(s) Spoken:
Arabic
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BOWEN, JOHN DAVID, PSY

Provider Gender: Male
License number: PSY30271
NPI: 1861949190
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Hours:

BRADDOCK, ADAM, MD

Provider Gender: Male
License number: A114671
NPI: 1013163542
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

BRANTMAN, ANNE E , NPA

Provider Gender: Female
License number: 12343
NPI: 1689621633
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
SENIOR MEDICAL
ASSOCIATES INC

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

2810 CAMINO DEL RIO S STE 102 SAN DIEGO, CA 92108-3819 Phone: (619) 299-1419 Fax: (858) 461-6008 After Hours Phone: (619) 299-1419 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: BROMLEY, BRIAN, MD Provider Gender: Male License number: 20A5363 NPI: 1306049564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 23172 NPI: 1093747511 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM
BROLASKI, GEORGE, MD Provider Gender: Male License number: A20748 NPI: 1568502573 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu	BROMLEY, BRIAN, MD Provider Gender: Male License number: 20A5363 NPI: 1306049564 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	BUBBY, MYRA, CSW Provider Gender: Female License number: 23172 NPI: 1093747511 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026
	BUBBY, MYRA, CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
 License number: 23172
 NPI: 1093747511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female

License number: 85597

NPI: 1134591167

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW
Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW
Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
BURGOS, EDNA, CSW
Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM
BURGOS, EDNA, CSW
Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BURNS, PETER B , MD

Provider Gender: Male
License number: G145142
NPI: 1891727533
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Portuguese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours:

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

License number: A71653

NPI: 1033133483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Portuguese, Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CANN, RONALD, MD

Provider Gender: Male
License number: G83523
NPI: 1285941401
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

CANN, RONALD, MD

Provider Gender: Male

License number: G83523

NPI: 1285941401

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

545 LAUREL ST

SAN DIEGO, CA 92101-1634

Phone: (619) 433-4399

Fax: (619) 233-0453

After Hours Phone: (619)

433-4399

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours:

CARBONELL, SONIA, PSY

Provider Gender: Female

License number: 19752

NPI: 1902976343

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4157 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1609

Phone: (619) 285-7097

Fax: (619) 564-8140

After Hours Phone: (619)

285-7097

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/64

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours:

CARBONELL, SONIA, PSY

Provider Gender: Female

License number: 19752

NPI: 1902976343

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213

Fax: (619) 281-6738

After Hours Phone: (619)

280-4213

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-5:30PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male

License number: A137940

NPI: 1811212145

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD
Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
 License number: A137940
 NPI: 1811212145
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
CARILLO, KRYSTAL I, CSW
 Provider Gender: Female
 License number: 80068
 NPI: 1871906735
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-TH 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**CARINO DIOKNO, RHODA,
PSY**
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619) 234-2158
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**CARINO DIOKNO, RHODA,
PSY**
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CARINO DIOKNO, RHODA,

PSY
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

**CARINO DIOKNO, RHODA,
PSY**
Provider Gender: Female
License number: 28073
NPI: 1629109483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female
 License number: 28073
 NPI: 1629109483
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
 License number: A91362
 NPI: 1558442566
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 892 27TH ST

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours:

CARLTON, SHARMILA G , MD
Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1963 4TH AVE
 SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619) 233-3432
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARLTON, SHARMILA G , MD
Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 995 GATEWAY CENTER WAY
 SAN DIEGO, CA 92102-4500
Phone: (619) 398-2156
Fax: (619) 398-2165
After Hours Phone: (619) 398-2156
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours:

CARLTON, SHARMILA G , MD
Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian

CARLTON, SHARMILA G , MD
Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

COMMUNITY RESEARCH FOUNDATION INC
 743 10TH AVE
 SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours:

CARLTON, SHARMILA G , MD
Provider Gender: Female
License number: A91362
NPI: 1558442566
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

CARLTON, SHARMILA G , MD

Provider Gender: Female
 License number: A91362
 NPI: 1558442566
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1568 6TH AVE
 SAN DIEGO, CA 92101-3216
 Phone: (619) 696-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 696-0822
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-6PM

CARR-LEE, NICOLE, PSY

Provider Gender: Female
 License number: 26191

NPI: 1316270481
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
 License number: 82782
 NPI: 1598165441
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female
 License number: 82782
 NPI: 1598165441
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions	NPI: 1598165441	Phone: (619) 515-2338
American Sign Language (ASL):	Provider English Spoken: Yes	Fax: (619) 702-8536
Yes	Provider Language(s) Spoken:	After Hours Phone: (619)
Please contact provider for	Cultural Competency:	515-2338
Accessibility information	FAMILY HEALTH CENTERS OF	Website:
Hours: M-F 8AM-5PM	SAN DIEGO	www.beaconhealthoptions.com
CASTELLANOS, TERESITA D ,	1550 BROADWAY STE 2	Accepting New Patients: Yes
CSW	SAN DIEGO, CA 92101-5713	Site English Spoken: Yes
Provider Gender: Female	Phone: (619) 515-2338	Site Language(s) Spoken:
License number: 82782	Fax: (619) 702-8535	American Sign Language, Farsi,
NPI: 1598165441	After Hours Phone: (619)	Japanese, Portuguese, Russian,
Provider English Spoken: Yes	515-2338	Spanish, Yue Chinese
Provider Language(s) Spoken:	Website:	TDD: No
Cultural Competency:	www.beaconhealthoptions.com	Min/Max Age: 0/99
FAMILY HEALTH CENTERS OF	Accepting New Patients: Yes	Gender Restriction: No Gender
SAN DIEGO	Site English Spoken: Yes	Restrictions
4094 4TH AVE	Site Language(s) Spoken:	American Sign Language (ASL):
SAN DIEGO, CA 92103-2143	American Sign Language, Farsi,	Yes
Phone: (619) 515-2338	Japanese, Portuguese, Russian,	Please contact provider for
Fax: (619) 702-8536	Spanish, Yue Chinese	Accessibility information
After Hours Phone: (619)	TDD: No	Hours: M-F 8:30AM-5PM
515-2338	Min/Max Age: 0/99	CASTELLANOS, TERESITA D ,
Website:	Gender Restriction: No Gender	CSW
www.beaconhealthoptions.com	Restrictions	Provider Gender: Female
Accepting New Patients: Yes	American Sign Language (ASL):	License number: 82782
Site English Spoken: Yes	Yes	NPI: 1598165441
Site Language(s) Spoken:	Please contact provider for	Provider English Spoken: Yes
American Sign Language, Farsi,	Accessibility information	Provider Language(s) Spoken:
Japanese, Portuguese, Russian,	Hours: M-TH 8:30AM-5PM	Cultural Competency:
Spanish, Yue Chinese	CASTELLANOS, TERESITA D ,	FAMILY HEALTH CENTERS OF
TDD: No	CSW	SAN DIEGO
Min/Max Age:	Provider Gender: Female	5454 EL CAJON BLVD
Gender Restriction: No Gender	License number: 82782	SAN DIEGO, CA 92115-3621
Restrictions	NPI: 1598165441	Phone: (619) 515-2338
American Sign Language (ASL):	Provider English Spoken: Yes	Fax: (619) 702-8536
Yes	Provider Language(s) Spoken:	After Hours Phone: (619)
Please contact provider for	Cultural Competency:	515-2338
Accessibility information	FAMILY HEALTH CENTERS OF	Website:
Hours: M-F 8:30AM-5PM	SAN DIEGO	www.beaconhealthoptions.com
CASTELLANOS, TERESITA D ,	4725 MARKET ST	Accepting New Patients: Yes
CSW	SAN DIEGO, CA 92102-4715	Site English Spoken: Yes
Provider Gender: Female		Site Language(s) Spoken:
License number: 82782		American Sign Language, Farsi,
		Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

CHAMBERS, NICOLE, PSY

Provider Gender: Female

License number: PSY30966

NPI: 1821297029

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

CHANG, YUFANG J , MD

Provider Gender: Female

License number: A119710

NPI: 1093918807

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC

1568 6TH AVE

SAN DIEGO, CA 92101-3216

Phone: (619) 696-0822

Fax: (619) 696-9573

After Hours Phone: (619)
696-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-6PM

CHANG, YUFANG J , MD

Provider Gender: Female

License number: A119710

NPI: 1093918807

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC

1963 4TH AVE

SAN DIEGO, CA 92101-2394

Phone: (619) 233-3432

Fax: (619) 233-7022

After Hours Phone: (619)

233-3432

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHANG, YUFANG J , MD

Provider Gender: Female
License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
9AM-5PM

CHANG, YUFANG J , MD

Provider Gender: Female
License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619)
239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

CHANG, YUFANG J , MD

Provider Gender: Female
License number: A119710
NPI: 1093918807
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

CHAPMAN, DONNA M , MFT

Provider Gender: Female
License number: 83943
NPI: 1457637068
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
CHAPMAN, DONNA
2525 CAMINO DEL RIO S STE
107
SAN DIEGO, CA 92108-3718
Phone: (619) 908-9908
Fax:
After Hours Phone: (619)
908-9908
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-10PM, W
9AM-10PM, F 8:30AM-9PM, SA
8AM-12PM

CHAUDHRI, YASHWANT, MD

Provider Gender: Male
License number: A67679

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CHAUDHRI, YASHWANT, MD
Provider Gender: Male
License number: A67679
NPI: 1043258429
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD STE B10 & B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 312-6660
After Hours Phone: (844) 200-2426
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

No
 Please contact provider for Accessibility information
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD
Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,TU,TH,F
 8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD
Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: YASHWANT CHAUDRI MD A

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

PROF CORP
 4077 FIFTH AVE
 SAN DIEGO, CA 92103-2105
Phone: (619) 294-8111
Fax:
After Hours Phone: (619) 294-8111
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CHAUHAN, SMIT S , MD
Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CHAUHAN, SMIT S , MD
Provider Gender: Male
License number: A123312
NPI: 1700083391
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD
 STE B10 & B11
 SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 312-6660
After Hours Phone: (844) 200-2426
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Urdu
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

CHAUHAN, SMIT S , MD
Provider Gender: Male
License number: A123312
NPI: 1700083391

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 YASHWANT CHAUDRI MD A
 PROF CORP
 7850 VISTA HILL AVE
 SAN DIEGO, CA 92123-2717
Phone: (858) 836-8434
Fax: (619) 596-9893
After Hours Phone: (858) 836-8434
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 6AM-6PM

CHEN, ANGELA, MFT
Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
License number: LMFT40923
NPI: 1811027956
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
 License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female

License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female
 License number: LMFT40923
 NPI: 1811027956
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
 License number: A107075
 NPI: 1154468684
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1568 6TH AVE
 SAN DIEGO, CA 92101-3216
 Phone: (619) 696-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 696-0822
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-6PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
License number: A107075
NPI: 1154468684
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female

License number: A107075
NPI: 1154468684
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 892 27TH ST
 SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
License number: A107075
NPI: 1154468684
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 995 GATEWAY CENTER WAY
 SAN DIEGO, CA 92102-4500
Phone: (619) 398-2156
Fax: (619) 398-2165
After Hours Phone: (619) 398-2156

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female
License number: A107075
NPI: 1154468684
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1260 MORENA BLVD
 SAN DIEGO, CA 92110-3889
Phone: (619) 398-0355
Fax: (619) 398-0350
After Hours Phone: (619) 398-0355
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-8PM

CHERNOBELSKY, RONIT L , MD

Provider Gender: Female

License number: A107075

NPI: 1154468684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH
FOUNDATION INC

1963 4TH AVE

SAN DIEGO, CA 92101-2394

Phone: (619) 233-3432

Fax: (619) 233-7022

After Hours Phone: (619)

233-3432

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

CHI, IDA C , CSW

Provider Gender: Female

License number: 21911

NPI: 1407003874

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-2PM

CHMIEL, RENEE L , PSY

Provider Gender: Female

License number: 22592

NPI: 1801026984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

ACCESS PSYCHOLOGY

SERVICES, PC

750 B ST STE 2870

SAN DIEGO, CA 92101-8132

Phone: (619) 722-0014

Fax: (619) 327-4174

After Hours Phone: (619)

722-0014

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 9AM-5PM

CHOW, LAUREN J , NPA

Provider Gender: Female

License number: 95019296

NPI: 1497413603

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-1PM

CHOW, LAUREN J , NPA

Provider Gender: Female

License number: 95019296

NPI: 1497413603

Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 810-8700 <i>Fax:</i> (858) 633-4680 <i>After Hours Phone:</i> (858) 810-8700 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM, SA 8AM-2PM	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM
CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com	CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616

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J. Directorio de proveedores de salud mental

NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

CHRISTENSEN, MELISSA, CSW

Provider Gender: Female
License number: 69616
NPI: 1922313394
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

CHRISTENSEN, MELISSA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 69616 <i>NPI:</i> 1922313394 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	SAN DIEGO, CA 92108-2448 <i>Phone:</i> (619) 280-0285 <i>Fax:</i> (619) 280-0286 <i>After Hours Phone:</i> (619) 280-0285 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> 0/64 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 10AM-5PM	No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
CLARK, MARY M , PSY <i>Provider Gender:</i> Female <i>License number:</i> 17897 <i>NPI:</i> 1659374775 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> CLARK, MARY 10981 SAN DIEGO MISSION RD STE 114	CLEMENT, LUIS, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28534 <i>NPI:</i> 1235364712 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 <i>Phone:</i> (619) 234-2158 <i>Fax:</i> (619) 234-1979 <i>After Hours Phone:</i> (619) 234-2158 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i>	CLONTS, PAUL A , CSW <i>Provider Gender:</i> Male <i>License number:</i> 87259 <i>NPI:</i> 1467808568 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W, F 8:30AM-5PM
		COLLINS, CONSTANCE A , CSW <i>Provider Gender:</i> Female <i>License number:</i> 23330 <i>NPI:</i> 1477600195 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>

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J. Directorio de proveedores de salud mental

Cultural Competency:
SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619) 234-2158
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

COMBS, LAURI, CSW
Provider Gender: Female
License number: LCSW75330
NPI: 1538398979
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

CORBETT, KIMBERLY F , PSY
Provider Gender: Female
License number: 21669
NPI: 1235239823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
CORBETT, KIMBERLY
 5190 GOVERNOR DR STE 104
 SAN DIEGO, CA 92122-2848
Phone: (619) 298-2098
Fax: (619) 615-2244
After Hours Phone: (619) 298-2098
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No

Min/Max Age: 0/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W,F 8AM-6PM, TH 8AM-7:30PM

COURT, MARIA C , MD
Provider Gender: Female
License number: A113797

NPI: 1316196108
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CROCKFORD, DANE, PSY
Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions	<i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	<i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM CROCKFORD, DANE, PSY <i>Provider Gender:</i> Male <i>License number:</i> 28313 <i>NPI:</i> 1780031831 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

CROCKFORD, DANE, PSY

Provider Gender: Male
License number: 28313
NPI: 1780031831
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

CRUZ ARAUJO, ANDREA L , MD

Provider Gender: Female
License number: A160789
NPI: 1124401435
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

CUELLAR, BETHANY, MFT

Provider Gender: Female
License number: 79616
NPI: 1720388374
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

CUELLAR, BETHANY, MFT

Provider Gender: Female
License number: 79616

NPI: 1720388374
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

CUTLER, APRYL, NPA

Provider Gender: Female
License number: 95012457
NPI: 1467960120
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours:

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

License number: 82240

NPI: 1841797644

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

DALONSO, SANDRA L , CSW
Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DALONSO, SANDRA L , CSW
Provider Gender: Female
License number: 82240
NPI: 1841797644
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW
Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

DAN, WENDY L , CSW

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-TH 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female

License number: 26015

NPI: 1700224037

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM

DE LEEUW, KELLEY, MD

Provider Gender: Female

License number: A114857

NPI: 1720395361

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NESTOR COMMUNITY HEALTH
CENTER

1016 OUTER RD

SAN DIEGO, CA 92154-1351

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

429-3733

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU,TH 8AM-8PM, W,F

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-5PM, SA 8AM-12PM

DE LLANO, CARMEN, PSY

Provider Gender: Female

License number: PSY11154

NPI: 1992752406

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

DR. CARMEN DE LLANO, PH.D.

3505 CAMINO DEL RIO S STE
335

SAN DIEGO, CA 92108-4090

Phone: (619) 584-6299

Fax: (619) 468-6917

After Hours Phone: (619)

584-6299

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours: M-W 1PM-8:30PM, TH
1PM-6PM

DE SILVA, NIHAL, MD

Provider Gender: Male

License number: C135933

NPI: 1003834789

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

Maithili, Sinhala, Sinhalese,

Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Hours:

DEACON, CASSIE, CSW

Provider Gender: Female

License number: 94105

NPI: 1720452998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)

810-8700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Farsi, Spanish,

Vietnamese, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-2PM

DEACON, CASSIE, CSW

Provider Gender: Female

License number: 94105

NPI: 1720452998

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA
8AM-1PM

DEAM, JONATHAN, MD

Provider Gender: Male

License number: A126198

NPI: 1982864948

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

DEBBOLD, ERIC M , MD

Provider Gender: Male
License number: 164068
NPI: 1144726415
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

DEIGNAN, PATRICIA, CSW

Provider Gender: Female
License number: 21861
NPI: 1679630776
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
PATRICIA, DEIGNAN
 2496 E ST STE 2F
 SAN DIEGO, CA 92102-6208
Phone: (619) 723-9244
Fax:
After Hours Phone: (619) 723-9244
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

Hours: TU 9AM-5PM, W,TH 9AM-5:30PM, F 9AM-1:30PM

DEWART, ELIZABETH, NPA

Provider Gender: Female
License number: 22736
NPI: 1407027618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858) 810-8787
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-1PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female

License number: 97277

NPI: 1124457023

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: A47803 NPI: 1912031030 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:
DIAZ, LIZETH, CSW Provider Gender: Female License number: 97277 NPI: 1124457023 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	DIAZ, LIZETH, CSW Provider Gender: Female License number: 97277 NPI: 1124457023 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	DOBOS, DAVID, MD Provider Gender: Male License number: G57276 NPI: 1548318348 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300
DIAZ, LIZETH, CSW Provider Gender: Female License number: 97277 NPI: 1124457023 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	DIA, ALI R , MD Provider Gender: Male	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	<i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	Accessibility information <i>Hours:</i> M-F 8AM-5PM	2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,
DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	DOBOS, DAVID, MD <i>Provider Gender:</i> Male <i>License number:</i> G57276 <i>NPI:</i> 1548318348 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

DOMINGUEZ- BARROS, INES N , PSY

Provider Gender: Female
License number: 26075
NPI: 1518031376
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
ACCESS PSYCHOLOGY
SERVICES, PC
750 B ST STE 2870
SAN DIEGO, CA 92101-8132
Phone: (619) 722-0014
Fax: (619) 327-4174
After Hours Phone: (619)
722-0014
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male

License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DRISCOLL, MICHAEL S , CSW

Provider Gender: Male
 License number: 93951
 NPI: 1659761880
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715	DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

2288

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM
DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM
DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female
 License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DUNFORD, KATELYN C , MFT

Provider Gender: Female

License number: 126626
 NPI: 1437517497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520

Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male

License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male

License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW

Provider Gender: Male
 License number: 70988
 NPI: 1437606126
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM DWYER, GEORGE, CSW Provider Gender: Male License number: 70988 NPI: 1437606126 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM DWYER, GEORGE, CSW Provider Gender: Male	License number: 70988 NPI: 1437606126 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM DYLAK, JASMINE C , CSW Provider Gender: Female License number: 33-0743869 NPI: 1659782498 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM ERBE, EDWARD J , MD Provider Gender: Male License number: G76886 NPI: 1952318289 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male

License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male

License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ERBE, EDWARD J , MD

Provider Gender: Male
 License number: G76886
 NPI: 1952318289
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM ERBE, EDWARD J , MD Provider Gender: Male License number: G76886 NPI: 1952318289 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM ERBE, EDWARD J , MD Provider Gender: Male	License number: G76886 NPI: 1952318289 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM ESCAMILLA, KARLA B , CSW Provider Gender: Female License number: 87168 NPI: 1134613946 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201	Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: ESFANDIARI, ALI, PSY Provider Gender: Male License number: 30605 NPI: 1215239603 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: ACCESS PSYCHOLOGY SERVICES, PC 750 B ST STE 2870 SAN DIEGO, CA 92101-8132 Phone: (619) 722-0014 Fax: (619) 327-4174 After Hours Phone: (619) 722-0014 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No Min/Max Age: 0/99
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST

SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW

Provider Gender: Female

License number: 87322

NPI: 1215342118

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Provider Gender:</i> Female <i>License number:</i> 87322 <i>NPI:</i> 1215342118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
FAJARDO, JACQUELINE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 87322 <i>NPI:</i> 1215342118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99	FAJARDO, JACQUELINE M , CSW <i>Provider Gender:</i> Female <i>License number:</i> 87322 <i>NPI:</i> 1215342118 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	FANTINO, RAMONA E , CSW <i>Provider Gender:</i> Female <i>License number:</i> 70826 <i>NPI:</i> 1215191515 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

FAUTH, JAMIE, NPA

Provider Gender: Female
 License number: 95002650
 NPI: 1396098455
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858) 810-8787
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-1PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM
FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD

Provider Gender: Female

License number: A164677

NPI: 1912404492

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FEDEROFF, MONICA, MD
 Provider Gender: Female
 License number: A164677
 NPI: 1912404492
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FERRER, ADAREZZA I , MD
 Provider Gender: Female

License number: A123390
 NPI: 1316175524
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 743 10TH AVE
 SAN DIEGO, CA 92101-6673
 Phone: (619) 239-4663
 Fax: (619) 239-3045
 After Hours Phone: (619) 239-4663
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

FERRER, ADAREZZA I , MD
 Provider Gender: Female
 License number: A123390
 NPI: 1316175524
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 892 27TH ST
 SAN DIEGO, CA 92154-1444
 Phone: (619) 275-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 275-0822

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

FERRER, ADAREZZA I , MD
 Provider Gender: Female
 License number: A123390
 NPI: 1316175524
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 COMMUNITY RESEARCH FOUNDATION INC
 1568 6TH AVE
 SAN DIEGO, CA 92101-3216
 Phone: (619) 696-0822
 Fax: (619) 696-9573
 After Hours Phone: (619) 696-0822
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-6PM

FERRER, ADAREZZA I , MD

Provider Gender: Female

License number: A123390

NPI: 1316175524

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

1963 4TH AVE

SAN DIEGO, CA 92101-2394

Phone: (619) 233-3432

Fax: (619) 233-7022

After Hours Phone: (619)

233-3432

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

FERRER, ADAREZZA I , MD

Provider Gender: Female

License number: A123390

NPI: 1316175524

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

1465 30TH ST STE K

SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822

Fax: (619) 696-9573

After Hours Phone: (619)

275-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,W 9AM-8PM, TU,TH,F

9AM-5PM

FERRIS, DONALD W , MD

Provider Gender: Male

License number: G24351

NPI: 1770756835

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

INTEGRATED HEALTH

PARTNERS - ST VINCENT DE

PAUL VILLAGE INC

1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500

Fax: (619) 687-1067

After Hours Phone: (619)

233-8500

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM, TH

8:30AM-9PM

FERTIG, PATRICIA A , MD

Provider Gender: Female

License number: 20A14928

NPI: 1457642803

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

4290 POLK AVE

SAN DIEGO, CA 92105-1524

Phone: (619) 563-0250

Fax: (619) 563-0015

After Hours Phone: (619)

563-0250

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Vietnamese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM, SA

8AM-2PM

FERTIG, PATRICIA A , MD

Provider Gender: Female

License number: 20A14928

NPI: 1457642803

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
Phone: (858) 280-2058
Fax: (619) 563-0015
After Hours Phone: (858)
 280-2058

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

FIGUEROA, FABIOLA, PSY

Provider Gender: Female
License number: PSY24471
NPI: 1720283211
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
NESTOR COMMUNITY HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619)
 429-3733
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
 TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,TU,TH 8AM-8PM, W,F
 8AM-5PM, SA 8AM-12PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female

License number: 19815

NPI: 1134147457

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM FLOWERS, LAURA L , CSW Provider Gender: Female License number: 74705 NPI: 1437648862 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	License number: 92918 NPI: 1942814181 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM
FLORES, MARY LUPE, CSW Provider Gender: Female License number: 19815 NPI: 1134147457 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM FLYNN CRUZ, MARY E , CSW Provider Gender: Female	Fontana, Louis A , MD Provider Gender: Male License number: G49072 NPI: 1780734343 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM FRANCO, RODRIGO, CSW Provider Gender: Male License number: 71548 NPI: 1952736043 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
FORZANI, CHRISTINA A , PSY Provider Gender: Female License number: 25710 NPI: 1902939630 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: (619) 563-0015 After Hours Phone: (619) 563-0250 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Vietnamese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for	FRANCO, RODRIGO, CSW Provider Gender: Male License number: 71548 NPI: 1952736043 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken:	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548

NPI: 1952736043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male

License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
 License number: 71548
 NPI: 1952736043
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female

License number: 16284
 NPI: 1588795298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

FREEMAN, KAY M , MFT

Provider Gender: Female
 License number: 16284
 NPI: 1588795298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

FREEMAN, KAY M , MFT

Provider Gender: Female
 License number: 16284
 NPI: 1588795298
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

FRITZ, JENNIFER K , PSY
 Provider Gender: Female
 License number: PSY24350
 NPI: 1013071497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619) 662-4100
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

FRITZ, JENNIFER K , PSY
 Provider Gender: Female
 License number: PSY24350

NPI: 1013071497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
 Phone: (619) 445-6200
 Fax: (619) 238-5551
 After Hours Phone: (619) 445-6200
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY
 Provider Gender: Female
 License number: PSY24350
 NPI: 1013071497
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
 Phone: (619) 445-6200
 Fax: (619) 824-9076
 After Hours Phone: (619) 445-6200
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Armenian
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

FUENTES WEST, MARYSOL, MFT

Provider Gender: Female
 License number: 39962
 NPI: 1285770941
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FUENTES WEST, MARYSOL
 4080 CENTRE ST STE 207
 SAN DIEGO, CA 92103-2658
 Phone: (619) 422-7216
 Fax:

After Hours Phone: (619) 422-7216
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: Yes
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 9AM-6PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):

Yes

Please contact provider for
Accessibility information

Hours:

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information

Hours: M-F 8AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713

NPI: 1366519670

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

GAHAGAN, SHEILA, MD

Provider Gender: Female
License number: G53666
NPI: 1053327221
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

License number: 16711

NPI: 1174646301

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 16711
 NPI: 1174646301
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GATTEY, JOEL A , MFT

Provider Gender: Male
 License number: 112422
 NPI: 1487942488
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
 License number: 170667
 NPI: 1508151598
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GAUD, KRISTINA G , MD
Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GENTILE, GILBERT J , CSW
Provider Gender: Male
License number: 17074
NPI: 1164965265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH
 PARTNERS - ST VINCENT DE
 PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
 233-8500
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
 8:30AM-9PM

GIAMONA, KRISTEN, PSY
Provider Gender: Female
License number: 28419
NPI: 1376824383
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
 810-8700
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

GILLIS, RUTH, MFT
Provider Gender: Female
License number: 50313
NPI: 1568588325

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

GILLIS, RUTH, MFT

Provider Gender: Female
License number: 50313
NPI: 1568588325
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GLASSMAN, JAGA NATH, MD
Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
GLASSMAN, JAGA NATH, MD Provider Gender: Male License number: G55004 NPI: 1558409771 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619) 515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female
 License number: 13685
 NPI: 1366641813
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619) 515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GLEASON, SHEILA, PSY

Provider Gender: Female

License number: 13685

NPI: 1366641813

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GOMEZ-NARANJO, PATRICIA A, MD

Provider Gender: Female

License number: A55544

NPI: 1053324541

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619) 662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours:

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW

Provider Gender: Female

License number: 83254

NPI: 1821487406

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
 Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
 Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
 Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GONZALES, JULIANA, CSW
 Provider Gender: Female
 License number: 83254
 NPI: 1821487406
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours:

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALES, JULIANA, CSW
Provider Gender: Female
License number: 83254
NPI: 1821487406
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM
GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW
Provider Gender: Female
License number: 97593
NPI: 1326346198
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
Provider Gender: Female
License number: 87716
NPI: 1134597123
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

GOTTUNG, CHRISTINA, CSW
 Provider Gender: Female
 License number: 87716
 NPI: 1134597123
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM
GOULD, HILARY, PSY
 Provider Gender: Female
 License number: 31088
 NPI: 1104297696
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

GRACE, MONIKA M, PSY
 Provider Gender: Female
 License number: 24462

NPI: 1497985832
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Modern Greek, French,
 Portuguese, Spanish
 Cultural Competency:
 GRACE COUNSELING AND
 PSYCHOTHERAPY
 2423 CAMINO DEL RIO S STE
 101
 SAN DIEGO, CA 92108-3734
 Phone: (619) 381-8472
 Fax: (619) 839-3973
 After Hours Phone: (619) 381-8472
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Modern Greek, French,
 Portuguese, Spanish
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-SA 8AM-8PM

GRAHAM, DEBRA JEANNE, NPA
 Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: OPERATION SAMAHAN
 9995 CARMEL MOUNTAIN RD STE B10 & B11
 SAN DIEGO, CA 92129-2889
 Phone: (844) 200-2426
 Fax: (858) 312-6660
 After Hours Phone: (844) 200-2426
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Urdu
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

GRAHAM, DEBRA JEANNE, NPA

Provider Gender: Female
 License number: NP15657
 NPI: 1790757623
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Urdu
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TU,TH,F 8:30AM-5:30PM, W 10AM-7PM

GUARDADO SOTO, RAQUEL E, PSY

Provider Gender: Female

License number: 26883
 NPI: 1194999276
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

GUARDADO SOTO, RAQUEL E, PSY

Provider Gender: Female
 License number: 26883
 NPI: 1194999276
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency: SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858) 810-8787
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-1PM

GUILLEN-IBARRA, MIRIAM, CSW

Provider Gender: Female
 License number: 103357
 NPI: 1164691424
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

GUTIERREZ, APRIL P , CSW

Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520

Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female
 License number: 86166
 NPI: 1356749949
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM
GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615
GUTIERREZ, APRIL P , CSW Provider Gender: Female	GUTIERREZ, APRIL P , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 20A10936 NPI: 1699923318 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 545 LAUREL ST SAN DIEGO, CA 92101-1634 Phone: (619) 433-4399 Fax: (619) 233-0453 After Hours Phone: (619) 433-4399 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:
GUTIERREZ, APRIL P , CSW Provider Gender: Female License number: 86166 NPI: 1356749949 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	GUTIERREZ, SARAHI, CSW Provider Gender: Female License number: 82040 NPI: 1174909071 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	HARRIMAN, CORAL, PSY Provider Gender: Female License number: 26098 NPI: 1417373069 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com
	HARASHEVSKY, MARK, MD Provider Gender: Male	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF

SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
HARRIMAN, CORAL, PSY
Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098

NPI: 1417373069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098

NPI: 1417373069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098

NPI: 1417373069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098

NPI: 1417373069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
 License number: 26098
 NPI: 1417373069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098
 NPI: 1417373069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female
 License number: 26098
 NPI: 1417373069
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520

Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715	HAYDEN WADE, HELEN, PSY Provider Gender: Female License number: PSY19313 NPI: 1366951105 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female

License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY

Provider Gender: Female
 License number: PSY19313
 NPI: 1366951105
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U
 License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW

Provider Gender: U

License number: 74947
 NPI: 1154811636
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

HIGHTOWER, TERRI M , MFT

Provider Gender: Female
 License number: 43779
 NPI: 1063572899
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

HODGE, ROGER G , PSY

Provider Gender: Male
 License number: 26148
 NPI: 1306096714
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 OPERATION SAMAHAN
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126-2375
 Phone: (844) 200-2426
 Fax: (858) 695-9074
 After Hours Phone: (844) 200-2426
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

No
Please contact provider for
Accessibility information
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM

HODGE, ROGER G , PSY

Provider Gender: Male
License number: 26148
NPI: 1306096714
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OPERATION SAMAHAN
9995 CARMEL MOUNTAIN RD
STE B10 & B11
SAN DIEGO, CA 92129-2889
Phone: (844) 200-2426
Fax: (858) 312-6660
After Hours Phone: (844)
200-2426
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M,TU,TH,F
8:30AM-5:30PM, W 10AM-7PM

HODGE, ROGER G , PSY

Provider Gender: Male
License number: 26148
NPI: 1306096714
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

HORNBROOK, JESSICA, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW
Provider Gender: Female
License number: 26598
NPI: 1134401805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
HORNBROOK, JESSICA, CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 26598
 NPI: 1134401805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HORNBROOK, JESSICA, CSW
 Provider Gender: Female
 License number: 26598
 NPI: 1134401805
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HOUSE, SEAN, PSY
 Provider Gender: Male
 License number: 25128
 NPI: 1659524544
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 HOUSE, SEAN
 11417 W BERNARDO CT STE K
 SAN DIEGO, CA 92127-1639
 Phone: (858) 254-4192
 Fax:
 After Hours Phone: (858)
 254-4192
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 9AM-7:30PM, TU
 9:30AM-7PM, W,TH
 9:30AM-7:30PM, F 9AM-5PM,
 SA 9AM-12PM

HUBER, REBECCA, MD
 Provider Gender: Female
 License number: A133711
 NPI: 1174960686
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
 Provider Gender: Female
 License number: A133711

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUBER, REBECCA, MD
Provider Gender: Female
License number: A133711
NPI: 1174960686
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

HUDSON, KATE, CSW
Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW
Provider Gender: Female
License number: 83712
NPI: 1194159384
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM HUDSON, KATE, CSW Provider Gender: Female License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM HUDSON, KATE, CSW Provider Gender: Female License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: 515-2520 After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM HUDSON, KATE, CSW Provider Gender: Female License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM HUDSON, KATE, CSW Provider Gender: Female	License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM HUDSON, KATE, CSW Provider Gender: Female License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

HUDSON, KATE, CSW
 Provider Gender: Female
 License number: 83712
 NPI: 1194159384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:
HUDSON, KATE, CSW
 Provider Gender: Female
 License number: 83712
 NPI: 1194159384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW
 Provider Gender: Female
 License number: 83712
 NPI: 1194159384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

License number: 83712
 NPI: 1194159384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

HUDSON, KATE, CSW
 Provider Gender: Female
 License number: 83712
 NPI: 1194159384
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 29526 NPI: 1225154081 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
HUDSON, KATE, CSW Provider Gender: Female License number: 83712 NPI: 1194159384 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	IBANEZ, BERNICE, PSY Provider Gender: Female License number: 22080 NPI: 1740394386 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	ISHIDA, YO, CSW Provider Gender: Female License number: 29526 NPI: 1225154081 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female

License number: 29526

NPI: 1225154081

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 89122 NPI: 1194976225 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM
ISHIDA, YO, CSW Provider Gender: Female License number: 29526 NPI: 1225154081 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	ISHIDA, YO, CSW Provider Gender: Female License number: 29526 NPI: 1225154081 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	JALAN, DEVESH, MD Provider Gender: Male License number: A167754 NPI: 1083092134 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713
JACKSON, TIENNA S , CSW Provider Gender: Female	JACKSON, TIENNA S , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male
 License number: A167754
 NPI: 1083092134
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female

License number: 20A13931

NPI: 1679834022

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female

License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM
JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JAMES, CHRISTINE E , MD
 Provider Gender: Female

License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JAMES, CHRISTINE E , MD
 Provider Gender: Female
 License number: 20A13931
 NPI: 1679834022
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	License number: 20A13931 NPI: 1679834022 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM
JAMES, CHRISTINE E , MD Provider Gender: Female License number: 20A13931 NPI: 1679834022 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	JAMES, CHRISTINE E , MD Provider Gender: Female License number: 20A13931 NPI: 1679834022 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	JASSO-RAMIREZ, MARTHA, CSW Provider Gender: Female License number: 26493 NPI: 1871772020 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
 License number: 26493
 NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
 License number: 26493
 NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Hours:

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
 License number: 26493
 NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
 License number: 26493
 NPI: 1871772020
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE

SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

JAUREGUI, CYNTHIA J , MFT

Provider Gender: Female
License number: 46152
NPI: 1003953886
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

JAUREGUI, CYNTHIA J , MFT

Provider Gender: Female
License number: 46152
NPI: 1003953886
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JENSEN, DEXTER, MD

Provider Gender: Male
License number: A67960
NPI: 1740465541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

License number: 25311

NPI: 1558602490

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

JONES, ADELE, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ATAVIA L , CSW
Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM
JONES, ATAVIA L , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW76796
 NPI: 1952734899
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male
 License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

JONES, MICHAEL A , CSW
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCS 22452
 NPI: 1548205719
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

JUAREZ, AMERICA, CSW
 Provider Gender: Female
 License number: 92516
 NPI: 1386281541
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

KANE, SADIE P , NPA
 Provider Gender: Female
 License number: 95004685
 NPI: 1942608161
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

**KAUFFMAN, CASSANDRA M ,
 PSY**
 Provider Gender: Female
 License number: 25899
 NPI: 1780845396
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 ACCESS PSYCHOLOGY
 SERVICES, PC
 750 B ST STE 2870
 SAN DIEGO, CA 92101-8132
 Phone: (619) 722-0014
 Fax: (619) 327-4174
 After Hours Phone: (619)
 722-0014
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 9AM-5PM

KEI, JUSTIN, MD
 Provider Gender: Male
 License number: A138266
 NPI: 1396150041

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

KEI, JUSTIN, MD

Provider Gender: Male
License number: A138266
NPI: 1396150041
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

KELLEY, KIMBERLY L , CSW

Provider Gender: Female
License number: 97888
NPI: 1326447897
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	Min/Max Age: 13/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 95005293 NPI: 1235672502 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
KERI, JASON S , MD Provider Gender: Male License number: A82017 NPI: 1811915812 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SENIOR MEDICAL ASSOCIATES INC 2810 CAMINO DEL RIO S STE 102 SAN DIEGO, CA 92108-3819 Phone: (619) 299-1419 Fax: (858) 461-6008 After Hours Phone: (619) 299-1419 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish TDD: No	KHAN, MAYSUN, CSW Provider Gender: Female License number: 71910 NPI: 1033519632 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	KLOBERDANZ, KELSEY L , NPA Provider Gender: Female License number: 95005293 NPI: 1235672502 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602
	KLOBERDANZ, KELSEY L , NPA Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

KLOBERDANZ, KELSEY L , NPA

Provider Gender: Female

License number: 95005293

NPI: 1235672502

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM
**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

**KLOBERDANZ, KELSEY L ,
NPA**
Provider Gender: Female
License number: 95005293
NPI: 1235672502
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
KLUEMPER, NICOLE, PSY
Provider Gender: Female
License number: 27064
NPI: 1902125818
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858) 810-8787
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

KLUEMPER, NICOLE, PSY
Provider Gender: Female
License number: 27064
NPI: 1902125818
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338

Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male

License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KNIGHT, MARK ANTHONY, MD

Provider Gender: Male
 License number: A94460
 NPI: 1851573554
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615
KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:	NPI: 1467650473 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:
KNIGHT, TARA J , NPA Provider Gender: Female License number: 95012285 NPI: 1801394358 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No	KOH, STEVE H , MD Provider Gender: Male License number: A103468 NPI: 1467650473 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	KOH, STEVE H , MD Provider Gender: Male License number: A103468 NPI: 1467650473 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338
	KOH, STEVE H , MD Provider Gender: Male License number: A103468	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM
KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions	KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes
KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions	KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	KOH, STEVE H , MD <i>Provider Gender:</i> Male <i>License number:</i> A103468 <i>NPI:</i> 1467650473 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD
Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Hours:
KOH, STEVE H , MD
Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

KOH, STEVE H , MD
Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST

SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

KOH, STEVE H , MD
Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KOH, STEVE H , MD

Provider Gender: Male
License number: A103468
NPI: 1467650473
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KOSMACH, JOSEPH J , MD

Provider Gender: Male
License number: 20A16558
NPI: 1801233911
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
KOSMACH, JOSEPH
7850 VISTA HILL AVE
SAN DIEGO, CA 92123-2717

Phone: (619) 294-4119
Fax:
After Hours Phone: (619) 294-4119
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: Yes
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-W,F 8AM-5PM, TH 8AM-5:30PM

KRITTMAN, STUART W , PSY

Provider Gender: Male
License number: PSY20233
NPI: 1174964399
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

KURANAKA, TRACY R , MD

Provider Gender: Female
License number: A75170
NPI: 1619930542
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858) 810-8787
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-1PM

KURANAKA, TRACY R , MD

Provider Gender: Female
License number: A75170
NPI: 1619930542
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619) 563-0250
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Vietnamese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

KURANAKA, TRACY R , MD

Provider Gender: Female
License number: A75170
NPI: 1619930542
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
Phone: (858) 280-2058
Fax: (619) 563-0015
After Hours Phone: (858) 280-2058
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
 License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female
License number: LCSW78555
NPI: 1174981500
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

LAKE, NAOMI B , CSW

Provider Gender: Female
License number: 17413
NPI: 1215084116
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO AMERICAN INDIAN
 HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619)
 234-2158
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LARDON, MICHAEL T , MD

Provider Gender: Male
License number: A48664
NPI: 1174630305
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:

LARDON, MICHAEL
3750 CONVOY ST STE 318
SAN DIEGO, CA 92111-3741
Phone: (858) 292-2929
Fax: (619) 292-2909
After Hours Phone: (858)
292-2929
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: Yes
Min/Max Age: 19/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 9AM-5PM, F
9AM-12PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW

Provider Gender: Female
License number: 83136
NPI: 1275905622
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 83136 NPI: 1275905622 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
LEBLANC, ASHLEY B , CSW Provider Gender: Female License number: 83136 NPI: 1275905622 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	LEBLANC, ASHLEY B , CSW Provider Gender: Female License number: 83136 NPI: 1275905622 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	LEBLANC, ASHLEY B , CSW Provider Gender: Female License number: 83136 NPI: 1275905622 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
 Provider Gender: Female
 License number: 83136
 NPI: 1275905622
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
LEBLANC, ASHLEY B , CSW
 Provider Gender: Female
 License number: 83136
 NPI: 1275905622
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

LEWIS, ARASELI P , PSY
 Provider Gender: Female

License number: 25551
 NPI: 1144395542
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 ACCESS PSYCHOLOGY
 SERVICES, PC
 750 B ST STE 2870
 SAN DIEGO, CA 92101-8132
 Phone: (619) 722-0014
 Fax: (619) 327-4174
 After Hours Phone: (619) 722-0014
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 9AM-5PM

LIANG, YINGJIAN, MD
 Provider Gender: Female
 License number: A127013
 NPI: 1912295361
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Mandarin
 Cultural Competency:
 LIANG, YINGJIAN
 7850 VISTA HILL AVE
 SAN DIEGO, CA 92123-2717
 Phone: (858) 499-8430
 Fax: (858) 278-7721
 After Hours Phone: (858) 499-8430

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin <i>TDD:</i> Yes <i>Min/Max Age:</i> 13/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 9AM-5PM	Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM
LIDSTONE, PAVEN, MD <i>Provider Gender:</i> Female <i>License number:</i> 161149 <i>NPI:</i> 1942662093 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	LIDSTONE, PAVEN, MD <i>Provider Gender:</i> Female <i>License number:</i> 161149 <i>NPI:</i> 1942662093 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>	LIDSTONE, PAVEN, MD <i>Provider Gender:</i> Female <i>License number:</i> 161149 <i>NPI:</i> 1942662093 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM

LIDSTONE, PAVEN, MD

Provider Gender: Female

License number: 161149

NPI: 1942662093

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 161149	Phone: (619) 515-2338
Min/Max Age:	NPI: 1942662093	Fax: (619) 702-8536
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	After Hours Phone: (619) 515-2338
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Website:
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
Hours:	1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website:	Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website:	LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website:	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website:
www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	LIDSTONE, PAVEN, MD Provider Gender: Female License number: 161149 NPI: 1942662093 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368	FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368	
LIDSTONE, PAVEN, MD Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM LIERA, CARMEN G , CSW Provider Gender: Female License number: 72986 NPI: 1275895443 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: LIM, SANDRA S , MD Provider Gender: Female	License number: 20A13075 NPI: 1083963094 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM LIM, SANDRA S , MD Provider Gender: Female License number: 20A13075 NPI: 1083963094 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM LIM, SANDRA S , MD Provider Gender: Female License number: 20A13075 NPI: 1083963094 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female

License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

LIM, SANDRA S , MD

Provider Gender: Female

License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
 License number: 20A13075
 NPI: 1083963094
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LINDEMAN, KURTIS P , MD

Provider Gender: Male

License number: A104052
 NPI: 1124155791
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: LA MAESTRA COMMUNITY HEALTH CENTERS
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours:

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female

License number: 22526

NPI: 1093991663

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

LIPPERT, HEATHER M , CSW
 Provider Gender: Female
 License number: 22526
 NPI: 1093991663
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIU, TIMOTHY C , MD
 Provider Gender: Male
 License number: A105535
 NPI: 1720262801
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Mandarin, Yue Chinese
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858)
 810-8787
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Spanish, Vietnamese,
 Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-1PM

LIU, TIMOTHY C , MD
 Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A105535
 NPI: 1720262801
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Mandarin, Yue Chinese
 Cultural Competency: SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

LLAMAS, SASHA G , CSW

Provider Gender: Female
 License number: 94249
 NPI: 1356713739
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

LOEB, CINDY, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
 License number: 75333
 NPI: 1619108511
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LOEB, CINDY, CSW

Provider Gender: Female
License number: 75333
NPI: 1619108511
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LOVE-ROBLES, YVONNE, PSY

Provider Gender: Female
License number: 18321
NPI: 1902812811
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

LUCKS, BONNIE D , PSY

Provider Gender: Female
License number: 22788
NPI: 1609910876
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 LUCKS PSYCHOLOGY INC
 2878 CAMINO DEL RIO S STE
 315
 SAN DIEGO, CA 92108-3846
Phone: (619) 569-0777
Fax: (619) 563-4559

After Hours Phone: (619)
 569-0777
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: Yes
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 10AM-6PM, TU-TH
 8AM-9PM, F 8AM-7PM

LYDIARD, JESSICA, MD

Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	<i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com	LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes	LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
	LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	LYDIARD, JESSICA, MD <i>Provider Gender:</i> Female <i>License number:</i> A171775 <i>NPI:</i> 1841731296 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

LYDIARD, JESSICA, MD
Provider Gender: Female
License number: A171775
NPI: 1841731296
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)
515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619) 515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male

License number: 92724

NPI: 1538704002

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
 License number: 92724
 NPI: 1538704002
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:
MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY
 Provider Gender: Female
 License number: 25570
 NPI: 1659520179
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female

License number: 25570

NPI: 1659520179

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MACMASTER, LINDSAY, PSY Provider Gender: Female License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MACMASTER, LINDSAY, PSY Provider Gender: Female License number: 25570 NPI: 1659520179 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143
	MAHONEY, PATRICIA A , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM
MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MAIETTA, KATHLEEN H , CSW

Provider Gender: Female
License number: 88399
NPI: 1487128617
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM
MAK, HEATHER, MD
Provider Gender: Female
License number: A153551
NPI: 1033430863
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO AMERICAN INDIAN HEALTH CENTER
 2630 1ST AVE
 SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619) 234-2158
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MALAK, LAWRENCE, MD

Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

MALAK, LAWRENCE, MD

Provider Gender: Male
License number: A115345
NPI: 1467773028
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

MANESS, PAULA J , PSY
Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
Phone: (619) 445-6200
Fax: (619) 238-5551
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY
Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MANUEL, LUCKVIN P , MD
Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 1465 30TH ST STE K
 SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F
 9AM-5PM

MANUEL, LUCKVIN P , MD
Provider Gender: Male
License number: A89173
NPI: 1699857813
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 COMMUNITY RESEARCH
 FOUNDATION INC
 892 27TH ST
 SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
 275-0822
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> MANUEL, LUCKVIN P , MD <i>Provider Gender:</i> Male <i>License number:</i> A89173 <i>NPI:</i> 1699857813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 743 10TH AVE SAN DIEGO, CA 92101-6673 <i>Phone:</i> (619) 239-4663 <i>Fax:</i> (619) 239-3045 <i>After Hours Phone:</i> (619) 239-4663 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Russian TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> MANUEL, LUCKVIN P , MD <i>Provider Gender:</i> Male <i>License number:</i> A89173 <i>NPI:</i> 1699857813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency:	COMMUNITY RESEARCH FOUNDATION INC 1963 4TH AVE SAN DIEGO, CA 92101-2394 <i>Phone:</i> (619) 233-3432 <i>Fax:</i> (619) 233-7022 <i>After Hours Phone:</i> (619) 233-3432 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Russian TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM MANUEL, LUCKVIN P , MD <i>Provider Gender:</i> Male <i>License number:</i> A89173 <i>NPI:</i> 1699857813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1568 6TH AVE SAN DIEGO, CA 92101-3216 <i>Phone:</i> (619) 696-0822 <i>Fax:</i> (619) 696-9573 <i>After Hours Phone:</i> (619) 696-0822 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Russian	TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-6PM MANUEL, LUCKVIN P , MD <i>Provider Gender:</i> Male <i>License number:</i> A89173 <i>NPI:</i> 1699857813 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC 1260 MORENA BLVD SAN DIEGO, CA 92110-3889 <i>Phone:</i> (619) 398-0355 <i>Fax:</i> (619) 398-0350 <i>After Hours Phone:</i> (619) 398-0355 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-8PM MARTINEZ, IVONNE B , CSW <i>Provider Gender:</i> Female <i>License number:</i> 85604 <i>NPI:</i> 1225355498 <i>Provider English Spoken:</i> Yes
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM	<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i>	Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM
MARTINEZ, STEPHANIE, MD <i>Provider Gender:</i> Female <i>License number:</i> 152787 <i>NPI:</i> 1699126367 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201 <i>Phone:</i> (619) 662-4100 <i>Fax:</i> <i>After Hours Phone:</i> (619) 662-4100 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	MARTINEZ, STEPHANIE, MD <i>Provider Gender:</i> Female <i>License number:</i> 152787 <i>NPI:</i> 1699126367 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information	MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
	MARTIR, MICHEL, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73174 <i>NPI:</i> 1356528434 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i>	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female

License number: 73174

NPI: 1356528434

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MARTIR, MICHEL, CSW
Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MASTERS, MARCHITA, PSY
Provider Gender: Female
License number: 17265
NPI: 1043330467
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:

After Hours Phone: (619)
 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

MA, CI, MD
Provider Gender: Female
License number: A134158
NPI: 1801185400
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Mandarin
Cultural Competency:
 MA, CI
 7850 VISTA HILL AVE
 SAN DIEGO, CA 92123-2717
Phone: (858) 848-5386
Fax: (858) 836-8765
After Hours Phone: (858)
 848-5386
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 9AM-5PM

MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female

License number: 14201

NPI: 1396838082

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM
MCADAMS, HILDA, NPA
Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8AM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female

License number: 29689

NPI: 1851544340

Provider English Spoken: Yes

Provider Language(s) Spoken:

American Sign Language

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

MCKELLOGG GUAJARDO, MEGAN A , PSY

Provider Gender: Female

License number: 23450

NPI: 1952454043

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

MCKELLOGG GUAJARDO,
MEGAN

3821 FRONT ST

SAN DIEGO, CA 92103-3019

Phone: (619) 354-9081

Fax:

After Hours Phone: (619)

354-9081

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
No*

Please contact provider for
Accessibility information

*Hours: TU,W 9AM-8PM, SA
9AM-2PM*

MEJIAS, JUAN C , PSY

Provider Gender: Male

License number: 26953

NPI: 1558560730

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

LA MAESTRA COMMUNITY
HEALTH CENTERS

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213

Fax: (619) 281-6738

After Hours Phone: (619)

280-4213

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
No*

Please contact provider for
Accessibility information

Hours: M-F 8AM-5:30PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-TH 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

License number: 99697

NPI: 1952741506

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT

Provider Gender: Female
 License number: 99697
 NPI: 1952741506
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MENDEZ PEREZ, MARIA C , CSW

Provider Gender: Female
 License number: 89151
 NPI: 1356902795
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MENDEZ, ANDRES G , PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
 License number: 79014
 NPI: 1639403884
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

MERRILL, SARAH M , CSW

Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW

Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

METZLER, CINDEA J , MFT

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: LMFT38808
NPI: 1487690483
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 CINDEA J METZLER, LMFT
 3633 CAMINO DEL RIO S STE
 102
 SAN DIEGO, CA 92108-4012
Phone: (858) 254-6590
Fax:

After Hours Phone: (858)
 254-6590
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: TU 7PM-8PM

MILLER, BRIAN P , MD
Provider Gender: Male
License number: A68180
NPI: 1861411381
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MILLER, BRIAN
 7850 VISTA HILL AVE
 SAN DIEGO, CA 92123-2717
Phone: (858) 836-8434
Fax: (619) 740-5055
After Hours Phone: (858)
 836-8434
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female

License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	License number: 25354 NPI: 1346472305 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM
MILLICAN, RUTH, PSY Provider Gender: Female License number: 25354 NPI: 1346472305 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	MILLICAN, RUTH, PSY Provider Gender: Female License number: 25354 NPI: 1346472305 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	MILLICAN, RUTH, PSY Provider Gender: Female License number: 25354 NPI: 1346472305 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
 Provider Gender: Female
 License number: 25354
 NPI: 1346472305
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

MIRANDA, CYNTHIA, PSY
 Provider Gender: Female
 License number: 21188
 NPI: 1023186970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619) 280-4213
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5:30PM

MIRANDA, CYNTHIA, PSY
 Provider Gender: Female
 License number: 21188

NPI: 1023186970
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
 Phone: (619) 285-7097
 Fax: (619) 564-8140
 After Hours Phone: (619) 285-7097
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 19/64
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

MISHRA, GAURAV, MD
 Provider Gender: Male
 License number: A129941
 NPI: 1689804866
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Hindi, Kannada, Maithili, Spanish
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM
MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

MODAD, ALBERT, PSY

Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
 License number: 63550
 NPI: 1841337565
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MORALES MORENO,

MINERVA, CSW
 Provider Gender: Female
 License number: 63550
 NPI: 1841337565
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
 License number: 63550
 NPI: 1841337565
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

MORALES MORENO, MINERVA, CSW

Provider Gender: Female
 License number: 63550
 NPI: 1841337565
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-TH 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORALES MORENO, MINERVA, CSW

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
Japanese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes

Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese

Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
MORRISON, TYLER E , MD
Provider Gender: Male
License number: A144917
NPI: 1912391814
Provider English Spoken: Yes
Provider Language(s) Spoken:

Japanese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MOTAGHED, HENGAMEH, PSY
Provider Gender: Female
License number: 12707
NPI: 1366550592
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
 MOTAGHED, HENGAMEH
 411 CAMINO DEL RIO S STE
 200
 SAN DIEGO, CA 92108-3550
Phone: (858) 922-4959
Fax: (619) 294-8190
After Hours Phone: (858)
 922-4959

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,TU,TH 8AM-8PM

MOTAGHED, HENGAMEH, PSY

Provider Gender: Female

License number: 12707

NPI: 1366550592

Provider English Spoken: Yes

Provider Language(s) Spoken: Farsi

Cultural Competency:

MOTAGHED, HENGAMEH

591 CAMINO DE LA REINA STE 918

SAN DIEGO, CA 92108-3111

Phone: (858) 922-4959

Fax: (619) 294-8190

After Hours Phone: (858) 922-4959

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi

TDD: No

Min/Max Age: 19/64

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M,TU,TH 7AM-7PM

MUIR, KATHLEEN G , MFT

Provider Gender: Female

License number: 52081

NPI: 1093009334

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

MUIR, KATHLEEN

8885 RIO SAN DIEGO DR STE 365

SAN DIEGO, CA 92108-1627

Phone: (619) 873-7738

Fax: (619) 324-4154

After Hours Phone: (619)

873-7738

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M 4PM-9PM, W 12PM-4PM

MUNOZ, VIVIANA, CSW

Provider Gender: Female

License number: 66637

NPI: 1497987713

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619) 515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours:

MURPHY, ERIN, MFT

Provider Gender: Female

License number: 42623

NPI: 1063571925

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619) 515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

MURPHY, VALERIE R , MFT

Provider Gender: Female
 License number: 84920
 NPI: 1770732992
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 MURPHY, VALERIE
 3974 SORRENTO VALLEY
 BLVD UNIT 910255
 SAN DIEGO, CA 92191-7012
 Phone: (619) 786-6062
 Fax: (859) 724-3034
 After Hours Phone: (619) 786-6062
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age: 19/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-TH 11AM-7PM

NACHE-MORRIS MCCULLUM, TIFFANY, PSY

Provider Gender: Female
 License number: 29329
 NPI: 1528306206

Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
 License number: 25094
 NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
 License number: 25094
 NPI: 1275609760
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621	NADEAU MANNING, JULIE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 25094 <i>NPI:</i> 1275609760 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

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J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female

License number: 25094

NPI: 1275609760

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

NAFICY, MAJID, MD

Provider Gender: Male

License number: G70878

NPI: 1265564553

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi, Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

NARANJO, JORGE, MD

Provider Gender: Male

License number: A62504

NPI: 1992838684

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

SAN YSIDRO HEALTH CENTER

950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)

662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAVAKAS MD, EDWARD, MD

Provider Gender: Female
License number: 88320
NPI: 1184648248
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619)
239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444

Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619)
275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

NAWROCKI, KSENIA, MD

Provider Gender: Female
License number: A123879
NPI: 1487882742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619)
233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NAWROCKI, KSENIA, MD <i>Provider Gender:</i> Female <i>License number:</i> A123879 <i>NPI:</i> 1487882742 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> COMMUNITY RESEARCH FOUNDATION INC 1465 30TH ST STE K SAN DIEGO, CA 92154-3497 <i>Phone:</i> (619) 275-0822 <i>Fax:</i> (619) 696-9573 <i>After Hours Phone:</i> (619) 275-0822 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Russian TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M,W 9AM-8PM, TU,TH,F 9AM-5PM NAWROCKI, KSENIA, MD <i>Provider Gender:</i> Female <i>License number:</i> A123879 <i>NPI:</i> 1487882742 <i>Provider English Spoken:</i> Yes	<i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> COMMUNITY RESEARCH FOUNDATION INC 1568 6TH AVE SAN DIEGO, CA 92101-3216 <i>Phone:</i> (619) 696-0822 <i>Fax:</i> (619) 696-9573 <i>After Hours Phone:</i> (619) 696-0822 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Russian TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-6PM NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes	<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

NAZARIO, JACOBETH, PSY
 Provider Gender: Female
 License number: PSY32092
 NPI: 1326648684
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

NELSON, THEODORA, MD
 Provider Gender: Female
 License number: G75021
 NPI: 1326130584
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

NING, GRACE J , PSY
 Provider Gender: Female
 License number: 27293
 NPI: 1598911315
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858)
 810-8700

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

NING, GRACE J , PSY
 Provider Gender: Female
 License number: 27293
 NPI: 1598911315

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
 563-0250
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Vietnamese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
NOUHI, NUSHA, PSY
Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Farsi
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 <i>Phone:</i> (619) 515-2300 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2300 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520	<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions	Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency: SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

NOUHI, NUSHA, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NOUHI, NUSHA, PSY

Provider Gender: Female
License number: 27670
NPI: 1942433917
Provider English Spoken: Yes
Provider Language(s) Spoken: Farsi
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 <i>Phone:</i> (619) 515-2520 <i>Fax:</i> <i>After Hours Phone:</i> (619) 515-2520 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM	4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO	NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>	NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

**NWANGANGA, OKECHUKU R ,
CSW**

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

**NWANGANGA, OKECHUKU R ,
CSW**

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

**NWANGANGA, OKECHUKU R ,
CSW**

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

**NWANGANGA, OKECHUKU R ,
CSW**

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male
License number: 27072
NPI: 1285984450
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

OBRYAN, KELLY, PSY
Provider Gender: Female
License number: 24966
NPI: 1093882698
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

OCAMPO, ELAINE, NPA
Provider Gender: Female
License number: 95003427
NPI: 1063856805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
 563-0250
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Vietnamese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

OCAMPO, ELAINE, NPA
Provider Gender: Female
License number: 95003427
NPI: 1063856805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
 810-8700
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Farsi, Spanish,
 Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

OJHA, PRITI, MD
Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4290 POLK AVE
 SAN DIEGO, CA 92105-1524
Phone: (619) 563-0250
Fax: (619) 563-0015
After Hours Phone: (619)
 563-0250
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Vietnamese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
Phone: (858) 280-2058
Fax: (619) 563-0015
After Hours Phone: (858)
 280-2058
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM, SA
 8AM-2PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
 662-4100
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours:

OJHA, PRITI, MD

Provider Gender: Female

License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W, F 8:30AM-5PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
 810-8700

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

OJHA, PRITI, MD

Provider Gender: Female
License number: A139807
NPI: 1760897284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SAN DIEGO FAMILY CARE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: (858) 810-8787
Fax: (858) 279-0377
After Hours Phone: (858)
810-8787
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Spanish, Vietnamese,
Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

OLIVEIRA, SHANNON J , MFT

Provider Gender: Female
License number: 100161
NPI: 1386874626
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
OLIVEIRA, SHANNON
2535 CAMINO DEL RIO S STE
230
SAN DIEGO, CA 92108-3795
Phone: (707) 738-3453
Fax:
After Hours Phone: (707)
738-3453

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

OLIVER, ELIZABETH, CSW

Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST

SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
License number: 66862
NPI: 1326296351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female
 License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862
 NPI: 1326296351
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520

Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female
 License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

OMORODIN, AISHA, MD

Provider Gender: Female

License number: A169651
 NPI: 1629500301
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

ORBE, KERIN, MD

Provider Gender: Female
 License number: 20A17225
 NPI: 1114256690
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

ORTEGA, MARIA G , MFT

Provider Gender: Female
 License number: 49264
 NPI: 1154545739
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ORTIZ, MARIA, PSY

Provider Gender: Female
License number: 30953
NPI: 1497980775
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

PAI, SARAH A , NPA

Provider Gender: Female
License number: 23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: (619) 234-2158
Fax: (619) 234-1979
After Hours Phone: (619) 234-2158
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PAI, SARAH A , NPA
Provider Gender: Female
License number: 23711
NPI: 1255762167
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

PATTON, MICHAEL A , CSW

Provider Gender: Male
License number: 18244
NPI: 1184756702
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

PELLECCHIA, KRISTYN G , NPA

Provider Gender: Female

License number: 21354

NPI: 1780981266

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SENIOR MEDICAL

ASSOCIATES INC

2810 CAMINO DEL RIO S STE 102

SAN DIEGO, CA 92108-3819

Phone: (619) 299-1419

Fax: (858) 461-6008

After Hours Phone: (619)

299-1419

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

PENNER, ANDREW W , NPA

Provider Gender: Male

License number: 94025490

NPI: 1285862326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

EHAB YACOB MD INC.

3914 3RD AVE

SAN DIEGO, CA 92103-3003

Phone: (310) 515-8113

Fax: (310) 538-2102

After Hours Phone: (310)

515-8113

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-SU 7AM-9PM

PERRY, KATHERINE, NPA

Provider Gender: Female

License number: 95014964

NPI: 1215543426

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO AMERICAN INDIAN

HEALTH CENTER

2630 1ST AVE

SAN DIEGO, CA 92103-6599

Phone: (619) 234-2158

Fax: (619) 234-1979

After Hours Phone: (619)

234-2158

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5PM

PHAN, HY V , MD

Provider Gender: Male

License number: C56033

NPI: 1144373408

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

1465 30TH ST STE K

SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822

Fax: (619) 696-9573

After Hours Phone: (619)

275-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,W 9AM-8PM, TU,TH,F

9AM-5PM

PHAN, HY V , MD

Provider Gender: Male

License number: C56033

NPI: 1144373408

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619) 696-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-6PM

PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619) 233-3432
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-6PM

PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
10717 CAMINO RUIZ STE 207
SAN DIEGO, CA 92126-2364
Phone: (858) 695-2211
Fax: (858) 695-3521
After Hours Phone: (858) 695-2211
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 9:30AM-6PM

PHAN, HY V , MD
Provider Gender: Male
License number: C56033
NPI: 1144373408
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
License number: 91103
NPI: 1710361712
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 91103	Phone: (619) 515-2338
Min/Max Age:	NPI: 1710361712	Fax: (619) 702-8536
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	After Hours Phone: (619) 515-2338
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Website:
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
Hours:	3705 MISSION BLVD	Accepting New Patients: Yes
	SAN DIEGO, CA 92109-7104	Site English Spoken: Yes
	Phone: (619) 515-2338	Site Language(s) Spoken:
	Fax: (619) 702-8536	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
	After Hours Phone: (619) 515-2338	TDD: No
	Website:	Min/Max Age: 0/99
PINEDO, YANELI, CSW	www.beaconhealthoptions.com	Gender Restriction: No Gender Restrictions
Provider Gender: Male	Accepting New Patients: Yes	American Sign Language (ASL): Yes
License number: 91103	Site English Spoken: Yes	Please contact provider for Accessibility information
NPI: 1710361712	Site Language(s) Spoken:	Hours: M-F 8:30AM-5PM
Provider English Spoken: Yes	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	
Provider Language(s) Spoken: Cultural Competency:	TDD: No	
FAMILY HEALTH CENTERS OF SAN DIEGO	Min/Max Age: 0/99	PINEDO, YANELI, CSW
4725 MARKET ST	Gender Restriction: No Gender Restrictions	Provider Gender: Male
SAN DIEGO, CA 92102-4715	American Sign Language (ASL): Yes	License number: 91103
Phone: (619) 515-2338	Please contact provider for Accessibility information	NPI: 1710361712
Fax: (619) 702-8536	Hours: M-W,F 8:30AM-5PM	Provider English Spoken: Yes
After Hours Phone: (619) 515-2338		Provider Language(s) Spoken:
Website:		Cultural Competency:
www.beaconhealthoptions.com	PINEDO, YANELI, CSW	FAMILY HEALTH CENTERS OF SAN DIEGO
Accepting New Patients: Yes	Provider Gender: Male	3544 30TH ST
Site English Spoken: Yes	License number: 91103	SAN DIEGO, CA 92104-4120
Site Language(s) Spoken:	NPI: 1710361712	Phone: (619) 515-2424
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	Provider English Spoken: Yes	Fax: (619) 702-8536
TDD: No	Provider Language(s) Spoken:	After Hours Phone: (619) 515-2424
Min/Max Age: 0/99	Cultural Competency:	Website:
Gender Restriction: No Gender Restrictions	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
American Sign Language (ASL): Yes	1250 6TH AVE STE 100	Accepting New Patients: Yes
Please contact provider for Accessibility information	SAN DIEGO, CA 92101-4368	Site English Spoken: Yes
Hours: M-F 8:30AM-5PM		Site Language(s) Spoken:
		American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
PINEDO, YANELI, CSW		
Provider Gender: Male		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male

License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PINEDO, YANELI, CSW

Provider Gender: Male
 License number: 91103
 NPI: 1710361712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female

License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

PRASEK, LAUREN, NPA

Provider Gender: Female
 License number: 95004145
 NPI: 1932566031
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female

License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
 License number: 62650
 NPI: 1336188655
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female
 License number: A133675
 NPI: 1952747875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Russian
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Provider Gender: Female

License number: A133675

NPI: 1952747875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	<i>Hours:</i> M-W,F 8:30AM-5PM	SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM
QUIROZ, NORMA, MFT <i>Provider Gender:</i> Female <i>License number:</i> 50504 <i>NPI:</i> 1902945199 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	QUIROZ, NORMA, MFT <i>Provider Gender:</i> Female <i>License number:</i> 50504 <i>NPI:</i> 1902945199 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	RADOJEVIC, NATASHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSYD28495 <i>NPI:</i> 1821365008 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 <i>Phone:</i> (858) 810-8700 <i>Fax:</i> (858) 633-4680 <i>After Hours Phone:</i> (858) 810-8700 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese <i>TDD:</i> No
QUIROZ, NORMA, MFT <i>Provider Gender:</i> Female <i>License number:</i> 50504 <i>NPI:</i> 1902945199 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information	RABBAN, DIANA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 72987 <i>NPI:</i> 1033426374 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM	Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
RAMIREZ, LORIE, CSW Provider Gender: Male License number: 88678 NPI: 1356906259 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: (619) 563-0015 After Hours Phone: (619) 563-0250 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Vietnamese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM	RAMOS, ELIZABETH, CSW Provider Gender: Female License number: 73374 NPI: 1992046890 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143	RAMOS, ELIZABETH, CSW Provider Gender: Female License number: 73374 NPI: 1992046890 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338

Fax: (619) 702-8535

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-TH 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

RAMOS, ELIZABETH, CSW

Provider Gender: Female

License number: 73374

NPI: 1992046890

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 <i>Phone:</i> (619) 280-4213 <i>Fax:</i> (619) 281-6738 <i>After Hours Phone:</i> (619) 280-4213 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5:30PM
RAMOS, ELIZABETH, CSW <i>Provider Gender:</i> Female <i>License number:</i> 73374 <i>NPI:</i> 1992046890 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM	REGHABI, NASEEM, PSY <i>Provider Gender:</i> Female <i>License number:</i> 21940 <i>NPI:</i> 1225573421 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM	REID, EMILY, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95002766 <i>NPI:</i> 1083081467 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> LA MAESTRA COMMUNITY HEALTH CENTERS 4157 FAIRMOUNT AVE SAN DIEGO, CA 92105-1609 <i>Phone:</i> (619) 285-7097 <i>Fax:</i> (619) 564-8140 <i>After Hours Phone:</i> (619) 285-7097 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>TDD:</i> No <i>Min/Max Age:</i> 19/64
REID, EMILY, NPA <i>Provider Gender:</i> Female <i>License number:</i> 95002766 <i>NPI:</i> 1083081467 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> LA MAESTRA COMMUNITY HEALTH CENTERS		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

RENE, RACHELLE, PSY

Provider Gender: Female
License number: 23993
NPI: 1629108188
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

RENTERIA, SABRINA, MD

Provider Gender: Female
License number: A145894
NPI: 1285029421
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

RINGEL, BRENDA L , MD

Provider Gender: Female
License number: A65800
NPI: 1689869976
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 EXODUS RECOVERY, INC.
 2950 EL CAJON BLVD STE 4
 SAN DIEGO, CA 92104-1205
Phone: (619) 528-1752
Fax: (619) 528-1756
After Hours Phone: (619) 528-1752
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-4:30PM

ROBITZ, RACHEL A , MD

Provider Gender: Female
License number: A127641
NPI: 1700140159
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

RODRIGUEZ, CHRISTINE, PSY

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female
License number: 30472
NPI: 1568656619
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-W,F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

RODRIGUEZ, CHRISTINE, PSY
 Provider Gender: Female
 License number: 30472
 NPI: 1568656619
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
License number: 28590
NPI: 1447477781
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener
 información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de
 Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW
 Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619)
 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

ROSENFARB, BARBARA, CSW

Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSENFARB, BARBARA, CSW

Provider Gender: Female
 License number: 28590
 NPI: 1447477781
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROSE, RICHARD S , MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: G21963
 NPI: 1033206552
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SENIOR MEDICAL
 ASSOCIATES INC
 2810 CAMINO DEL RIO S STE
 102
 SAN DIEGO, CA 92108-3819
 Phone: (619) 299-1419
 Fax: (858) 461-6008
 After Hours Phone: (619)
 299-1419
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:

After Hours Phone: (619)
 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

ROZELL, KATHY, CSW
 Provider Gender: Female
 License number: 25068
 NPI: 1578603973
 Provider English Spoken: Yes
 Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours:
ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW
Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM
SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120
SACHS, MELISSA R , CSW Provider Gender: Female	SACHS, MELISSA R , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours:	License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM
SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	SACHS, MELISSA R , CSW Provider Gender: Female License number: 76968 NPI: 1649760356 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621
SACHS, MELISSA R , CSW Provider Gender: Female	SACHS, MELISSA R , CSW Provider Gender: Female	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
 Provider Gender: Female
 License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
 Provider Gender: Female
 License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW
 Provider Gender: Female

License number: 76968
 NPI: 1649760356
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

SALGUERO GALLAND, MARIO L , MD
 Provider Gender: Male
 License number: A122101
 NPI: 1487947826
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5:30PM

SALGUERO GALLAND, MARIO L, MD

Provider Gender: Male
License number: A122101
NPI: 1487947826
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 LA MAESTRA COMMUNITY HEALTH CENTERS
 4157 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1609
Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age: 19/64

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

SAMADI, ESTHER, MD

Provider Gender: Female
License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female
License number: A113657
NPI: 1396986204

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours:

SAMADI, ESTHER, MD

Provider Gender: Female
License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female
License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female
License number: A113657
NPI: 1396986204
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

SANGHADIA, MUKESH, MD

Provider Gender: Male
License number: C56113
NPI: 1366550246
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500
Phone: (619) 398-2156
Fax: (619) 398-2165
After Hours Phone: (619)
398-2156
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

SCHANOWITZ, JEFF Y , PSY

Provider Gender: Male
License number: 20362
NPI: 1679683007
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
SCHANOWITZ, JEFF
2525 CAMINO DEL RIO S STE
245
SAN DIEGO, CA 92108-3775
Phone: (619) 252-3713
Fax: (619) 810-0620
After Hours Phone: (619)
252-3713
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-SU 8AM-8PM SCOTT, KELLY, NPA Provider Gender: Female License number: 95015026 NPI: 1013420801 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO AMERICAN INDIAN HEALTH CENTER 2630 1ST AVE SAN DIEGO, CA 92103-6599 Phone: (619) 234-2158 Fax: (619) 234-1979 After Hours Phone: (619) 234-2158 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes	Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338	Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM SEPULVEDA, JOE, MD Provider Gender: Male License number: A113283 NPI: 1306165402 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions	<i>Provider English Spoken: Yes</i>	<i>Phone: (619) 515-2300</i>
<i>American Sign Language (ASL):</i>	<i>Provider Language(s) Spoken:</i>	<i>Fax:</i>
Yes	Spanish	<i>After Hours Phone: (619)</i>
Please contact provider for	<i>Cultural Competency:</i>	515-2300
Accessibility information	FAMILY HEALTH CENTERS OF	<i>Website:</i>
<i>Hours: M-F 8:30AM-5PM</i>	SAN DIEGO	www.beaconhealthoptions.com
SEPULVEDA, JOE, MD	4725 MARKET ST	<i>Accepting New Patients: Yes</i>
<i>Provider Gender: Male</i>	SAN DIEGO, CA 92102-4715	<i>Site English Spoken: Yes</i>
<i>License number: A113283</i>	<i>Phone: (619) 515-2338</i>	<i>Site Language(s) Spoken:</i>
<i>NPI: 1306165402</i>	<i>Fax: (619) 702-8536</i>	American Sign Language, Farsi,
<i>Provider English Spoken: Yes</i>	<i>After Hours Phone: (619)</i>	Japanese, Portuguese, Russian,
<i>Provider Language(s) Spoken:</i>	515-2338	Spanish, Yue Chinese
Spanish	<i>Website:</i>	<i>TDD: No</i>
<i>Cultural Competency:</i>	www.beaconhealthoptions.com	<i>Min/Max Age:</i>
FAMILY HEALTH CENTERS OF	<i>Accepting New Patients: Yes</i>	<i>Gender Restriction: No Gender</i>
SAN DIEGO	<i>Site English Spoken: Yes</i>	<i>Restrictions</i>
3544 30TH ST	<i>Site Language(s) Spoken:</i>	<i>American Sign Language (ASL):</i>
SAN DIEGO, CA 92104-4120	American Sign Language, Farsi,	Yes
<i>Phone: (619) 515-2424</i>	Japanese, Portuguese, Russian,	Please contact provider for
<i>Fax: (619) 702-8536</i>	Spanish, Yue Chinese	Accessibility information
<i>After Hours Phone: (619)</i>	<i>TDD: No</i>	<i>Hours:</i>
515-2424	<i>Min/Max Age: 0/99</i>	SEPULVEDA, JOE, MD
<i>Website:</i>	<i>Gender Restriction: No Gender</i>	<i>Provider Gender: Male</i>
www.beaconhealthoptions.com	<i>Restrictions</i>	<i>License number: A113283</i>
<i>Accepting New Patients: Yes</i>	<i>American Sign Language (ASL):</i>	<i>NPI: 1306165402</i>
<i>Site English Spoken: Yes</i>	Yes	<i>Provider English Spoken: Yes</i>
<i>Site Language(s) Spoken:</i>	Please contact provider for	<i>Provider Language(s) Spoken:</i>
American Sign Language, Farsi,	Accessibility information	Spanish
Japanese, Portuguese, Russian,	<i>Hours: M-F 8:30AM-5PM</i>	<i>Cultural Competency:</i>
Spanish, Yue Chinese	SEPULVEDA, JOE, MD	FAMILY HEALTH CENTERS OF
<i>TDD: No</i>	<i>Provider Gender: Male</i>	SAN DIEGO
<i>Min/Max Age: 0/99</i>	<i>License number: A113283</i>	4094 4TH AVE
<i>Gender Restriction: No Gender</i>	<i>NPI: 1306165402</i>	SAN DIEGO, CA 92103-2143
<i>Restrictions</i>	<i>Provider English Spoken: Yes</i>	<i>Phone: (619) 515-2338</i>
<i>American Sign Language (ASL):</i>	<i>Provider Language(s) Spoken:</i>	<i>Fax: (619) 702-8536</i>
Yes	Spanish	<i>After Hours Phone: (619)</i>
Please contact provider for	<i>Cultural Competency:</i>	515-2338
Accessibility information	FAMILY HEALTH CENTERS OF	<i>Website:</i>
<i>Hours: M-F 8:30AM-5PM</i>	SAN DIEGO	www.beaconhealthoptions.com
SEPULVEDA, JOE, MD	4065 3RD AVE	<i>Accepting New Patients: Yes</i>
<i>Provider Gender: Male</i>	SAN DIEGO, CA 92103-2184	<i>Site English Spoken: Yes</i>
<i>License number: A113283</i>		<i>Site Language(s) Spoken:</i>
<i>NPI: 1306165402</i>		American Sign Language, Farsi,
		Japanese, Portuguese, Russian,

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)

515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100

SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4874 POLK AVE

SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

SHEARED, JORDAN S , CSW

Provider Gender: Female

License number: ASW74739

NPI: 1699121749

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)

515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

2204 NATIONAL AVE

SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

SIMPSON, JENNIFER, CSW

Provider Gender: Female
 License number: 82678
 NPI: 1740765866
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 82678 NPI: 1740765866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 662-4100 Fax: After Hours Phone: (619) 662-4100 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours:
SIMPSON, JENNIFER, CSW Provider Gender: Female License number: 82678 NPI: 1740765866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	SINNO, BASSAM, MD Provider Gender: Male License number: C37831 NPI: 1982767893 Provider English Spoken: Yes Provider Language(s) Spoken: Arabic Cultural Competency: SAN YSIDRO HEALTH CENTER 950 S EUCLID AVE SAN DIEGO, CA 92114-6201	SIPIN, ELVIRA P , CSW Provider Gender: Female License number: LCS15308 NPI: 1477759892 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
SIMPSON, JENNIFER, CSW Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW
 Provider Gender: Female
 License number: LCS15308
 NPI: 1477759892
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

SMITH, STEPHANIE, PSY
 Provider Gender: Female

License number: 30779
 NPI: 1346700325
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

SOLTANI, MARYAM, MD
 Provider Gender: Female
 License number: A139075
 NPI: 1518372267
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NESTOR COMMUNITY HEALTH CENTER
 1016 OUTER RD
 SAN DIEGO, CA 92154-1351
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619) 429-3733

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish
 TDD: No
 Min/Max Age: 13/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M,TU,TH 8AM-8PM, W,F 8AM-5PM, SA 8AM-12PM

SOLTANI, MARYAM, MD
 Provider Gender: Female
 License number: A139075
 NPI: 1518372267
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: (619) 233-8500
 Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

SPAHR, CHRISTIE C , MFT

Provider Gender: Female
License number: 51792
NPI: 1295085736

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-W,F 8:30AM-5PM

SPAHR, CHRISTIE C , MFT

Provider Gender: Female

License number: 51792

NPI: 1295085736

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours:

SPAHR, CHRISTIE C , MFT

Provider Gender: Female

License number: 51792

NPI: 1295085736

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4094 4TH AVE

SAN DIEGO, CA 92103-2143

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SPINELLI, LAUREN, CSW

Provider Gender: Female

License number: 82862

NPI: 1437630787

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: (858) 810-8787

Fax: (858) 279-0377

After Hours Phone: (858)

810-8787

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Spanish, Vietnamese,
Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM, SA

8AM-1PM

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SPINELLI, LAUREN, CSW

Provider Gender: Female
License number: 82862
NPI: 1437630787
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM, SA 8AM-2PM

STEVENSON, MARC E , CSW

Provider Gender: Male
License number: 70064
NPI: 1356795637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 INTEGRATED HEALTH PARTNERS - ST VINCENT DE PAUL VILLAGE INC
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638

Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM, TH 8:30AM-9PM

STEWART, ANDREA M , MFT

Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT

Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STEWART, ANDREA M , MFT

Provider Gender: U
License number: 45174
NPI: 1508993122

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT
Provider Gender: U
License number: 45174
NPI: 1508993122
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

STRAUSS, KATHLEEN L , PSY
Provider Gender: Female
License number: 15765
NPI: 1154362184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
STRAUSS, KATHLEEN
3914 3RD AVE
SAN DIEGO, CA 92103-3003
Phone: (619) 291-4808
Fax: (619) 291-4426
After Hours Phone: (619) 291-4808
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/64

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-5PM

SUHIR, ERIN, NPA
Provider Gender: Female
License number: 95008203
NPI: 1528426947
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1609
Phone: (619) 285-7097
Fax: (619) 564-8140
After Hours Phone: (619) 285-7097
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 19/64
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

SUHIR, ERIN, NPA
Provider Gender: Female
License number: 95008203
NPI: 1528426947
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency:
LA MAESTRA COMMUNITY
HEALTH CENTERS
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
Phone: (619) 280-4213
Fax: (619) 281-6738
After Hours Phone: (619) 280-4213
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5:30PM

SULLIVAN, JOHN P , MD
Provider Gender: Male
License number: A106680
NPI: 1851597389
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
1465 30TH ST STE K
SAN DIEGO, CA 92154-3497
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M,W 9AM-8PM, TU,TH,F 9AM-5PM

SULLIVAN, JOHN P , MD

Provider Gender: Male
License number: A106680
NPI: 1851597389
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

SULLIVAN, JOHN P , MD

Provider Gender: Male

License number: A106680
NPI: 1851597389
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
892 27TH ST
SAN DIEGO, CA 92154-1444
Phone: (619) 275-0822
Fax: (619) 696-9573
After Hours Phone: (619) 275-0822
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

SULLIVAN, JOHN P , MD

Provider Gender: Male
License number: A106680
NPI: 1851597389
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619) 696-0822

Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-6PM

SULLIVAN, JOHN P , MD

Provider Gender: Male
License number: A106680
NPI: 1851597389
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619) 233-3432
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female

License number: 95007730

NPI: 1003159344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

Phone: (619) 280-4213

Fax: (619) 281-6738

After Hours Phone: (619)

280-4213

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-5:30PM

SWEENEY, ZSA ZSA, NPA

Provider Gender: Female

License number: 95007730

NPI: 1003159344

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

LA MAESTRA COMMUNITY

HEALTH CENTERS

4157 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1609

Phone: (619) 285-7097

Fax: (619) 564-8140

After Hours Phone: (619)

285-7097

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 19/64

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

SWIFT, SOUZAN, PSY

Provider Gender: Female

License number: 30933

NPI: 1770918898

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

ACCESS PSYCHOLOGY

SERVICES, PC

750 B ST STE 2870

SAN DIEGO, CA 92101-8132

Phone: (619) 722-0014

Fax: (619) 327-4174

After Hours Phone: (619)

722-0014

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 9AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U

License number: 87601

NPI: 1205294543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U

License number: 87601

NPI: 1205294543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM

Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:

After Hours Phone: (619) 515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U
License number: 87601
NPI: 1205294543
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

TAHBAZ, ASH, MFT
 Provider Gender: U
 License number: 87601
 NPI: 1205294543
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM
TAYLOR, TASHA K , MD
 Provider Gender: Female
 License number: A82187
 NPI: 1528144433
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619) 662-4100
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

THANH, ELAINE, MD
 Provider Gender: Female
 License number: NP95019446

NPI: 1215696307
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
 Phone: (858) 280-2058
 Fax: (619) 563-0015
 After Hours Phone: (858) 280-2058
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

THICKSTUN, MARY SUSAN, CSW
 Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM
**THICKSTUN, MARY SUSAN,
CSW**
Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300

Fax:
After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>Restrictions</i> <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	<i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM
THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender	THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	THICKSTUN, MARY SUSAN, CSW <i>Provider Gender:</i> Female <i>License number:</i> 21573 <i>NPI:</i> 1437354875 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
 License number: 21573
 NPI: 1437354875
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U
 License number: 14259
 NPI: 1841541984
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-TH 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY
Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
THIESSEN, BRUCE L , PSY Provider Gender: U License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	THIESSEN, BRUCE L , PSY Provider Gender: U License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-W,F 8:30AM-5PM	THIESSEN, BRUCE L , PSY Provider Gender: U License number: 14259 NPI: 1841541984 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520

Fax:

After Hours Phone: (619)
515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3544 30TH ST

SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424

Fax: (619) 702-8536

After Hours Phone: (619)
515-2424

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U

License number: 14259

NPI: 1841541984

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

5454 EL CAJON BLVD

SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

THOMAS, DALIA M , CSW

Provider Gender: Female

License number: LCSW82132

NPI: 1104151372

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100

Fax:

After Hours Phone: (619)
662-4100

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours:

TIMONY, THERESA, NPA

Provider Gender: Female

License number: NP95007497

NPI: 1689818015

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

SAN DIEGO FAMILY CARE
7011 LINDA VISTA RD

SAN DIEGO, CA 92111-6307

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Farsi, Spanish,
Vietnamese, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-2PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4065 3RD AVE
SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619)
515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours:

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192

NPI: 1831361278

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-W,F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192

NPI: 1831361278

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

140 ELM ST

SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520

Fax:

After Hours Phone: (619) 515-2520

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8AM-5PM

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192

NPI: 1831361278

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male

License number: A102192

NPI: 1831361278

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Yue Chinese

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Yue Chinese
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

TORRES, LAURA, CSW
Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM
TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TORRES, LAURA, CSW Provider Gender: Female License number: 65059 NPI: 1568612943 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

TRIANA, JENNIFER, CSW
 Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
 Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
 Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

TRIANA, JENNIFER, CSW
 Provider Gender: Female
 License number: 88589
 NPI: 1073844460
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M-F 8AM-5PM
TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
TRIANA, JENNIFER, CSW
Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
License number: A149101
NPI: 1326484437
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-TH 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300
 Fax:

After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours:

TROYER, EMILY, PSY

Provider Gender: Female

License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-W,F 8:30AM-5PM

TROYER, EMILY, PSY

Provider Gender: Female
 License number: A149101
 NPI: 1326484437
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

TUCKER, MEGAN, PSY

Provider Gender: Female
 License number: 27333
 NPI: 1861877516
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 LA MAESTRA COMMUNITY
 HEALTH CENTERS
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105-1608
 Phone: (619) 280-4213
 Fax: (619) 281-6738
 After Hours Phone: (619)
 280-4213
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Spanish
 TDD: No
 Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5:30PM

VALENZUELA, GLORIA M , CSW

Provider Gender: Female
 License number: 22926
 NPI: 1679653380
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:
 After Hours Phone: (619)
 662-4100
 Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Arabic, Farsi, Hindi, Kannada,
 Maithili, Sinhala, Sinhalese,
 Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours:

VIERLING, SABRINA C , PSY

Provider Gender: Female
 License number: 26117
 NPI: 1215288238

Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 SAN DIEGO FAMILY CARE
 4305 UNIVERSITY AVE
 SAN DIEGO, CA 92105-1645
 Phone: (858) 280-2058
 Fax: (619) 563-0015
 After Hours Phone: (858)
 280-2058
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM, SA
 8AM-2PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
5454 EL CAJON BLVD
SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1550 BROADWAY STE 2

SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-TH 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
License number: 83457
NPI: 1619459187
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
 Phone: (619) 515-2300

Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male
 License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male

License number: 83457
 NPI: 1619459187
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female
 License number: 77233
 NPI: 1982848594
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713

Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female
 License number: 77233
 NPI: 1982848594
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 77233	Phone: (619) 515-2338
Min/Max Age:	NPI: 1982848594	Fax: (619) 702-8536
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	After Hours Phone: (619) 515-2338
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Website:
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
Hours: M-F 8AM-5PM	5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621	Accepting New Patients: Yes
	Phone: (619) 515-2338	Site English Spoken: Yes
WEAVER, JHOSMARA A , CSW	Fax: (619) 702-8536	Site Language(s) Spoken:
Provider Gender: Female	After Hours Phone: (619) 515-2338	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
License number: 77233	Website:	TDD: No
NPI: 1982848594	www.beaconhealthoptions.com	Min/Max Age: 0/99
Provider English Spoken: Yes	Accepting New Patients: Yes	Gender Restriction: No Gender Restrictions
Provider Language(s) Spoken: Cultural Competency:	Site English Spoken: Yes	American Sign Language (ASL): Yes
FAMILY HEALTH CENTERS OF SAN DIEGO	Site Language(s) Spoken:	Please contact provider for Accessibility information
2204 NATIONAL AVE	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	Hours: M-W,F 8:30AM-5PM
SAN DIEGO, CA 92113-3615	TDD: No	
Phone: (619) 515-2338	Min/Max Age: 0/99	WEAVER, JHOSMARA A , CSW
Fax: (619) 702-8536	Gender Restriction: No Gender Restrictions	Provider Gender: Female
After Hours Phone: (619) 515-2338	American Sign Language (ASL): Yes	License number: 77233
Website:	Please contact provider for Accessibility information	NPI: 1982848594
www.beaconhealthoptions.com	Hours: M-F 8:30AM-5PM	Provider English Spoken: Yes
Accepting New Patients: Yes		Provider Language(s) Spoken:
Site English Spoken: Yes	WEAVER, JHOSMARA A , CSW	Cultural Competency:
Site Language(s) Spoken:	Provider Gender: Female	FAMILY HEALTH CENTERS OF SAN DIEGO
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	License number: 77233	4094 4TH AVE
TDD: No	NPI: 1982848594	SAN DIEGO, CA 92103-2143
Min/Max Age:	Provider English Spoken: Yes	Phone: (619) 515-2338
Gender Restriction: No Gender Restrictions	Provider Language(s) Spoken:	Fax: (619) 702-8536
American Sign Language (ASL): Yes	Cultural Competency:	After Hours Phone: (619) 515-2338
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	Website:
Hours: M-F 8:30AM-5PM	3705 MISSION BLVD	www.beaconhealthoptions.com
	SAN DIEGO, CA 92109-7104	Accepting New Patients: Yes
WEAVER, JHOSMARA A , CSW		Site English Spoken: Yes
Provider Gender: Female		Site Language(s) Spoken:
		American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No	License number: 77233	Phone: (619) 515-2338
Min/Max Age:	NPI: 1982848594	Fax: (619) 702-8536
Gender Restriction: No Gender Restrictions	Provider English Spoken: Yes	After Hours Phone: (619) 515-2338
American Sign Language (ASL): Yes	Provider Language(s) Spoken: Cultural Competency:	Website:
Please contact provider for Accessibility information	FAMILY HEALTH CENTERS OF SAN DIEGO	www.beaconhealthoptions.com
Hours: M-F 8:30AM-5PM	4725 MARKET ST	Accepting New Patients: Yes
	SAN DIEGO, CA 92102-4715	Site English Spoken: Yes
	Phone: (619) 515-2338	Site Language(s) Spoken:
	Fax: (619) 702-8536	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
WEAVER, JHOSMARA A , CSW	After Hours Phone: (619) 515-2338	TDD: No
Provider Gender: Female	Website:	Min/Max Age: 0/99
License number: 77233	www.beaconhealthoptions.com	Gender Restriction: No Gender Restrictions
NPI: 1982848594	Accepting New Patients: Yes	American Sign Language (ASL): Yes
Provider English Spoken: Yes	Site English Spoken: Yes	Please contact provider for Accessibility information
Provider Language(s) Spoken: Cultural Competency:	Site Language(s) Spoken:	Hours: M-F 8:30AM-5PM
FAMILY HEALTH CENTERS OF SAN DIEGO	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	
4874 POLK AVE	TDD: No	
SAN DIEGO, CA 92105-2026	Min/Max Age: 0/99	WEAVER, JHOSMARA A , CSW
Phone: (619) 515-2338	Gender Restriction: No Gender Restrictions	Provider Gender: Female
Fax: (619) 702-8536	American Sign Language (ASL): Yes	License number: 77233
After Hours Phone: (619) 515-2338	Please contact provider for Accessibility information	NPI: 1982848594
Website:	Hours: M-F 8:30AM-5PM	Provider English Spoken: Yes
www.beaconhealthoptions.com		Provider Language(s) Spoken:
Accepting New Patients: Yes	WEAVER, JHOSMARA A , CSW	Cultural Competency:
Site English Spoken: Yes	Provider Gender: Female	FAMILY HEALTH CENTERS OF SAN DIEGO
Site Language(s) Spoken:	License number: 77233	1250 6TH AVE STE 100
American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	NPI: 1982848594	SAN DIEGO, CA 92101-4368
TDD: No	Provider English Spoken: Yes	Phone: (619) 515-2338
Min/Max Age:	Provider Language(s) Spoken:	Fax: (619) 702-8536
Gender Restriction: No Gender Restrictions	Cultural Competency:	After Hours Phone: (619) 515-2338
American Sign Language (ASL): Yes	FAMILY HEALTH CENTERS OF SAN DIEGO	Website:
Please contact provider for Accessibility information	1809 NATIONAL AVE	www.beaconhealthoptions.com
Hours: M-F 8AM-5PM	SAN DIEGO, CA 92113-2113	Accepting New Patients: Yes
		Site English Spoken: Yes
		Site Language(s) Spoken:
		American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
WEAVER, JHOSMARA A , CSW		
Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: LCSW16118 NPI: 1902336837 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
WEAVER, JHOSMARA A , CSW Provider Gender: Female License number: 77233 NPI: 1982848594 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	WEBSTER, KRISTIN K , CSW Provider Gender: Female License number: LCSW16118 NPI: 1902336837 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368	WEBSTER, KRISTIN K , CSW Provider Gender: Female License number: LCSW16118 NPI: 1902336837 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
WEBSTER, KRISTIN K , CSW Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female

License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300
 Fax:
 After Hours Phone: (619) 515-2300
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours:

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120
 Phone: (619) 515-2424
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2424
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female

License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602

Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WEBSTER, KRISTIN K , CSW
 Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female
 License number: LCSW16118
 NPI: 1902336837
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WEEDEN, MIRIAN, MFT

Provider Gender: Female

License number: LMFT94339
 NPI: 1821364712
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Arabic
 Cultural Competency:
 SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201
 Phone: (619) 662-4100
 Fax:

After Hours Phone: (619) 662-4100
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours:

WEST, ALIXANDRA, CSW

Provider Gender: Female
 License number: 99311
 NPI: 1619375649
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
 SAN DIEGO, CA 92111-6307
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700

Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM, SA 8AM-2PM

WEST, ALIXANDRA, CSW

Provider Gender: Female
 License number: 99311
 NPI: 1619375649
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 SAN DIEGO FAMILY CARE
 6973 LINDA VISTA RD
 SAN DIEGO, CA 92111-6342
 Phone: (858) 810-8787
 Fax: (858) 279-0377
 After Hours Phone: (858) 810-8787
 Website:

www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

WIENS, KATHRYN, PSY

Provider Gender: Female
License number: 27115
NPI: 1134470701
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
INTEGRATED HEALTH
PARTNERS - ST VINCENT DE
PAUL VILLAGE INC
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619)
233-8500
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM, TH
8:30AM-9PM

WIGLE, CHARLES E , MFT

Provider Gender: Male
License number: MFC29757
NPI: 1407911878
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

SAN DIEGO
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-W,F 8:30AM-5PM

WIJAYARATNE, IMANIE S , PSY

Provider Gender: Female
License number: 25044
NPI: 1932358355
Provider English Spoken: Yes
Provider Language(s) Spoken:
Sinhala, Sinhalese
Cultural Competency:
SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619)
662-4100
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Arabic, Farsi, Hindi, Kannada,
Maithili, Sinhala, Sinhalese,
Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours:

WILHOIT, LAURA, PSY

Provider Gender: Female
License number: 26656
NPI: 1649497637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
COMMUNITY RESEARCH
FOUNDATION INC
995 GATEWAY CENTER WAY
SAN DIEGO, CA 92102-4500
Phone: (619) 398-2156
Fax: (619) 398-2165
After Hours Phone: (619)
398-2156
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

WILHOIT, LAURA, PSY

Provider Gender: Female
License number: 26656
NPI: 1649497637
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
 928 BROADWAY
 SAN DIEGO, CA 92101-5514
Phone: (619) 977-3716
Fax: (619) 481-3075
After Hours Phone: (619) 977-3716
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-4:30PM

WILLIAMS, SHANTRICE M , NPA

Provider Gender: Female
License number: 19664
NPI: 1578865549
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: SAN YSIDRO HEALTH CENTER
 950 S EUCLID AVE
 SAN DIEGO, CA 92114-6201

Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours:

WILSON, NICOLE M , CSW

Provider Gender: Female
License number: 94855
NPI: 1033576400
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

WINGFIELD, CAROLYN, PSY

Provider Gender: Female
License number: 28716
NPI: 1013316520
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: ACCESS PSYCHOLOGY SERVICES, PC
 750 B ST STE 2870
 SAN DIEGO, CA 92101-8132
Phone: (619) 722-0014
Fax: (619) 327-4174
After Hours Phone: (619) 722-0014
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 9AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY

Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND
 COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
Phone: (619) 445-6200
Fax: (619) 238-5551
After Hours Phone: (619)
 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-F 8AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:

After Hours Phone: (619)
 515-2300
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours:

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 Phone: (619) 515-2338 Fax: (619) 702-8535 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-TH 8:30AM-5PM	WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 2204 NATIONAL AVE SAN DIEGO, CA 92113-3615

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1250 6TH AVE STE 100 SAN DIEGO, CA 92101-4368 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese	WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	WITT, ANNETTE, CSW Provider Gender: Female License number: 15770 NPI: 1912263468 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

WITT, ANNETTE, CSW

Provider Gender: Female
License number: 15770
NPI: 1912263468
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-W,F 8:30AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
Phone: (619) 445-6200
Fax: (619) 824-9076
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY

Provider Gender: Female
License number: PSY28694
NPI: 1346398922

Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 316 25TH ST
 SAN DIEGO, CA 92102-3016
Phone: (619) 445-6200
Fax: (619) 238-5551
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4065 3RD AVE
 SAN DIEGO, CA 92103-2184
Phone: (619) 515-2300
Fax:
After Hours Phone: (619) 515-2300
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i>	Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM	3705 MISSION BLVD SAN DIEGO, CA 92109-7104 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM
WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for	WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 <i>Phone:</i> (619) 515-2424 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2424 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619)
515-2520
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
License number: 95001899
NPI: 1245635564
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
 License number: 95001899
 NPI: 1245635564
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female

License number: 95001899
 NPI: 1245635564
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOLF, CELIA C , NPA

Provider Gender: Female
 License number: 95001899
 NPI: 1245635564
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: (619) 515-2520
 Fax:
 After Hours Phone: (619) 515-2520
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4725 MARKET ST
 SAN DIEGO, CA 92102-4715
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No

Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-W,F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: (619) 515-2338
 Fax: (619) 702-8535
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-TH 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
 Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male
 License number: NP95006887
 NPI: 1417471459
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619) 515-2338
 Website: www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM	License number: 23740 NPI: 1952785784 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307 Phone: (858) 810-8700 Fax: (858) 633-4680 After Hours Phone: (858) 810-8700 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Farsi, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM	Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Vietnamese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Hours: M-F 8AM-5PM, SA 8AM-2PM
WOOD, KEEGAN, NPA Provider Gender: Male License number: NP95006887 NPI: 1417471459 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3544 30TH ST SAN DIEGO, CA 92104-4120 Phone: (619) 515-2424 Fax: (619) 702-8536 After Hours Phone: (619) 515-2424 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	WOOLLEY, LAUREN, PSY Provider Gender: Female License number: 23740 NPI: 1952785784 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 4290 POLK AVE SAN DIEGO, CA 92105-1524 Phone: (619) 563-0250 Fax: (619) 563-0015 After Hours Phone: (619) 563-0250	WOOLLEY, LAUREN, PSY Provider Gender: Female License number: 23740 NPI: 1952785784 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: SAN DIEGO FAMILY CARE 6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342 Phone: (858) 810-8787 Fax: (858) 279-0377 After Hours Phone: (858) 810-8787 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Mandarin, Spanish, Vietnamese, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8AM-5PM, SA
8AM-1PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619)
515-2424
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian

Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female
License number: LCSW69810
NPI: 1821392002
Provider English Spoken: Yes
Provider Language(s) Spoken:
Russian
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
2204 NATIONAL AVE
SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM YALYSHAVA, VOLHA, CSW Provider Gender: Female License number: LCSW69810 NPI: 1821392002 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 5454 EL CAJON BLVD SAN DIEGO, CA 92115-3621 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM YALYSHAVA, VOLHA, CSW Provider Gender: Female License number: LCSW69810 NPI: 1821392002 Provider English Spoken: Yes Provider Language(s) Spoken:	Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 140 ELM ST SAN DIEGO, CA 92101-2602 Phone: (619) 515-2520 Fax: After Hours Phone: (619) 515-2520 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8AM-5PM YALYSHAVA, VOLHA, CSW Provider Gender: Female License number: LCSW69810 NPI: 1821392002 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4065 3RD AVE SAN DIEGO, CA 92103-2184 Phone: (619) 515-2300 Fax: After Hours Phone: (619) 515-2300	Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: YALYSHAVA, VOLHA, CSW Provider Gender: Female License number: LCSW69810 NPI: 1821392002 Provider English Spoken: Yes Provider Language(s) Spoken: Russian Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8AM-5PM YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4725 MARKET ST SAN DIEGO, CA 92102-4715 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8535 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-TH 8:30AM-5PM YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3705 MISSION BLVD SAN DIEGO, CA 92109-7104	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-W,F 8:30AM-5PM YALYSHAVA, VOLHA, CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW69810 <i>NPI:</i> 1821392002 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Russian <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 4094 4TH AVE SAN DIEGO, CA 92103-2143 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAPATEL, JUAN PABLO, CSW

Provider Gender: Male
License number: 78174
NPI: 1043446644
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: SAN YSIDRO HEALTH CENTER
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: (619) 662-4100
Fax:
After Hours Phone: (619) 662-4100
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Farsi, Hindi, Kannada, Maithili, Sinhala, Sinhalese, Spanish, Urdu
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
1963 4TH AVE
SAN DIEGO, CA 92101-2394
Phone: (619) 233-3432
Fax: (619) 233-7022
After Hours Phone: (619) 233-3432
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
743 10TH AVE
SAN DIEGO, CA 92101-6673
Phone: (619) 239-4663
Fax: (619) 239-3045
After Hours Phone: (619) 239-4663

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours:

ZARANKOW, BEATA, MD

Provider Gender: Female
License number: C53656
NPI: 1902995384
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: COMMUNITY RESEARCH FOUNDATION INC
1568 6TH AVE
SAN DIEGO, CA 92101-3216
Phone: (619) 696-0822
Fax: (619) 696-9573
After Hours Phone: (619) 696-0822
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-6PM

ZARANKOW, BEATA, MD

Provider Gender: Female

License number: C53656

NPI: 1902995384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

1465 30TH ST STE K

SAN DIEGO, CA 92154-3497

Phone: (619) 275-0822

Fax: (619) 696-9573

After Hours Phone: (619)

275-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,W 9AM-8PM, TU,TH,F

9AM-5PM

ZARANKOW, BEATA, MD

Provider Gender: Female

License number: C53656

NPI: 1902995384

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COMMUNITY RESEARCH

FOUNDATION INC

892 27TH ST

SAN DIEGO, CA 92154-1444

Phone: (619) 275-0822

Fax: (619) 696-9573

After Hours Phone: (619)

275-0822

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours:

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-W,F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 140 ELM ST
 SAN DIEGO, CA 92101-2602
Phone: (619) 515-2520
Fax:
After Hours Phone: (619) 515-2520
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3544 30TH ST
 SAN DIEGO, CA 92104-4120

Phone: (619) 515-2424
Fax: (619) 702-8536
After Hours Phone: (619) 515-2424
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4874 POLK AVE
 SAN DIEGO, CA 92105-2026
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
Phone: (619) 515-2338
Fax: (619) 702-8535
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-TH 8:30AM-5PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 4094 4TH AVE
 SAN DIEGO, CA 92103-2143
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO

1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 5454 EL CAJON BLVD
 SAN DIEGO, CA 92115-3621
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male
License number: A136760
NPI: 1508174970
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 2204 NATIONAL AVE
 SAN DIEGO, CA 92113-3615
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

4065 3RD AVE

SAN DIEGO, CA 92103-2184

Phone: (619) 515-2300

Fax:

After Hours Phone: (619)

515-2300

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours:

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF

SAN DIEGO

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

ZUREK, BEDEANIA R , CSW

Provider Gender: Female

License number: LCSW74215

NPI: 1942375811

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NESTOR COMMUNITY HEALTH
CENTER

1016 OUTER RD

SAN DIEGO, CA 92154-1351

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

429-3733

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

TDD: No

Min/Max Age: 13/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M,TU,TH 8AM-8PM, W,F

8AM-5PM, SA 8AM-12PM

SAN MARCOS

AKANDE, ADERONKE, NPA

Provider Gender: Female

License number: 21597

NPI: 1083980247

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 9AM-6PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

ALTAMIRANO, LEON, PSY

Provider Gender: Male
License number: 23734
NPI: 1619271517
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

BUCHMANN, RYAN D , MFT

Provider Gender: Male
License number: 50774
NPI: 1063639102
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 BUCHMANN, RYAN
 (1063639102)
 330 RANCHEROS DR STE 222
 SAN MARCOS, CA 92069-2940

Phone: (760) 566-8760
Fax: (760) 820-2461
After Hours Phone: (760) 566-8760
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 13/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: TU-F 10AM-6PM, SA 1PM-5PM

CAI, SHEILA X , MD

Provider Gender: Female
License number: C149845
NPI: 1780625012
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CHALMERS, VIRGINIA, CSW

Provider Gender: Female
License number: 28053
NPI: 1265613715
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CHENG, JIM, NPA

Provider Gender: Male
License number: 22852
NPI: 1790122638

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

COOK, SHERYL G , PSY
Provider Gender: Female
License number: 15449
NPI: 1750420816
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH SOLUTIONS INC
 960 W SAN MARCOS BLVD
 SAN MARCOS, CA 92078-1100
Phone: (858) 227-0887
Fax: (858) 430-9611
After Hours Phone: (858) 227-0887
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Russian
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 9AM-6PM

CORNER, EMILY, MFT
Provider Gender: Female
License number: 102353
NPI: 1093225823
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

CORTIZO, ROSA, PSY
Provider Gender: Female
License number: 22278
NPI: 1952316648
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
NORTH COUNTY HEALTH SERVICES
 150 VALPRED A RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

ESPOSITO, NICOLE E , MD
Provider Gender: Female
License number: A91107
NPI: 1497880579
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
COGNITIVE HEALTH SOLUTIONS INC
 960 W SAN MARCOS BLVD
 SAN MARCOS, CA 92078-1100

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (858) 227-0887
 Fax: (858) 430-9611
 After Hours Phone: (858) 227-0887
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-6PM

FLYNN (NEWMAN), DANIELLE I, PSY

Provider Gender: U
 License number: 26184
 NPI: 1477785137
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6700
 Fax: (760) 736-6753
 After Hours Phone: (760) 736-6700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender

Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-6PM, SA 8AM-5PM

FREEMAN, WANDA, NPA

Provider Gender: Female
 License number: 95003903
 NPI: 1659504264
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6700
 Fax: (760) 736-6753
 After Hours Phone: (760) 736-6700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Chinese
 TDD: No
 Min/Max Age:

Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 8AM-6PM, SA 8AM-5PM

GEORGIEV, MARY JO C, PSY

Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
 COGNITIVE HEALTH SOLUTIONS INC
 960 W SAN MARCOS BLVD
 SAN MARCOS, CA 92078-1100
 Phone: (858) 227-0887
 Fax: (858) 430-9611
 After Hours Phone: (858) 227-0887
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken: Hindi, Russian
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender Restrictions
 American Sign Language (ASL): No
 Please contact provider for Accessibility information
 Hours: M-F 9AM-6PM

GEORGIEV, MARY JO C, PSY

Provider Gender: Female
 License number: 17954
 NPI: 1518996875
 Provider English Spoken: Yes
 Provider Language(s) Spoken: Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
 Phone: (760) 736-6700
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 After Hours Phone: (760) 736-6700
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-6PM, SA 8AM-5PM

HARDIN INGRAM, ANDREA, CSW

Provider Gender: Female

License number: 28677

NPI: 1801947692

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

COGNITIVE HEALTH SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 9AM-6PM

JENSEN, BRIAN M , PSY

Provider Gender: Male

License number: 26041

NPI: 1518138049

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 8AM-6PM, SA 8AM-5PM

KOGOUT, OXANA A , NPA

Provider Gender: Female

License number: 95004052

NPI: 1477910214

Provider English Spoken: Yes

Provider Language(s) Spoken:

Russian

Cultural Competency:

COGNITIVE HEALTH SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858) 227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi, Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Hours: M-F 9AM-6PM

KRAPES, MICHAEL B , PSY

Provider Gender: Male

License number: 25077

NPI: 1215233028

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

MONTEZ, REBECCA, CSW

Provider Gender: Female
License number: 26869
NPI: 1396047809
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SIMMONS, LILIANA C , NPA

Provider Gender: Female
License number: 177800
NPI: 1396113254
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SIMMONS, SUZANNE, NPA

Provider Gender: Female
License number: 95016129
NPI: 1245733450
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SIMPSON, ERIC, PSY

Provider Gender: Male
License number: 28885
NPI: 1710110416
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: NORTH COUNTY HEALTH SERVICES
150 VALPRED A RD
SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-5PM

SUNDER, RAJAGOPAL K , MD

Provider Gender: Male

License number: 94223

NPI: 1972572824

Provider English Spoken: Yes

Provider Language(s) Spoken:

Hindi

Cultural Competency:

COGNITIVE HEALTH

SOLUTIONS INC

960 W SAN MARCOS BLVD

SAN MARCOS, CA 92078-1100

Phone: (858) 227-0887

Fax: (858) 430-9611

After Hours Phone: (858)

227-0887

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Hindi,

Russian

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 9AM-6PM

TAYLOR, CORRDERO A , CSW

Provider Gender: Male

License number: 71284

NPI: 1346501533

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-6PM, SA

8AM-5PM

TORRES, HECTOR M , PSY

Provider Gender: Male

License number: 13309

NPI: 1720265614

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-6PM, SA

8AM-5PM

WALKER, SHAYNA T , MD

Provider Gender: Female

License number: A107393

NPI: 1760688295

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

NORTH COUNTY HEALTH

SERVICES

150 VALPRED A RD

SAN MARCOS, CA 92069-2973

Phone: (760) 736-6700

Fax: (760) 736-6753

After Hours Phone: (760)

736-6700

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-F 8AM-6PM, SA

8AM-5PM

WELCH, MEGAN, MFT

Provider Gender: Female

License number: 113763

NPI: 1689117400

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 NORTH COUNTY HEALTH SERVICES
 150 VALPRED RD
 SAN MARCOS, CA 92069-2973
Phone: (760) 736-6700
Fax: (760) 736-6753
After Hours Phone: (760) 736-6700
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-6PM, SA 8AM-5PM

SANTEE

BARMAK, SHANT, PSY

Provider Gender: Male
License number: 24998
NPI: 1235408972
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Armenian
Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801

Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

CHAMBERS, NICOLE, PSY

Provider Gender: Female
License number: PSY30966
NPI: 1821297029
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

FRITZ, JENNIFER K , PSY

Provider Gender: Female
License number: PSY24350
NPI: 1013071497
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
 120 TOWN CENTER PKWY
 SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

MANESS, PAULA J , PSY

Provider Gender: Female
License number: 23787
NPI: 1437312097
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 MOUNTAIN HEALTH AND

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SWARTZ, SUSAN V , MFT
Provider Gender: Female
License number: 42894
NPI: 1265550362
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WINTER, JEFFERY C , PSY
Provider Gender: Male
License number: 6795
NPI: 1396904850
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

WOLFE, TINA L , PSY
Provider Gender: Female
License number: PSY28694
NPI: 1346398922
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
MOUNTAIN HEALTH AND COMMUNITY SERVICES INC
120 TOWN CENTER PKWY
SANTEE, CA 92071-5801
Phone: (619) 445-6200
Fax: (619) 873-3476
After Hours Phone: (619) 445-6200
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Armenian
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Hours: M-F 8AM-5PM

SPRING VALLEY

ABDULLAH, KERI, PSY
Provider Gender: Female
License number: 29990
NPI: 1699840587
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
ABDULLAH, KERI, PSY Provider Gender: Female License number: 29990 NPI: 1699840587 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99	AGUIRRE, LEAH B , CSW Provider Gender: Female License number: 74440 NPI: 1306151998 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	AGUIRRE, WENDY, CSW Provider Gender: Female License number: 74219 NPI: 1205946282 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

ALTERS, DENNIS, MD

Provider Gender: Male

License number: G36206

NPI: 1457371635

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ALVAREZ, DIANA P , CSW

Provider Gender: Female

License number: 81025

NPI: 1013200617

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

ANDERSON, NICOLE M , CSW

Provider Gender: Female

License number: LCSW28443

NPI: 1679766380

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

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J. Directorio de proveedores de salud mental

SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ARAGON, DARINKA M , MD
Provider Gender: Female
License number: A139241
NPI: 1114347291
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ARIELLA, LYNDIA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
ARIELLA, LYNDIA R , PSY
Provider Gender: Female
License number: 19450
NPI: 1073518965
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM
ASH, VIVIAN, CSW
Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ASH, VIVIAN, CSW

Provider Gender: Female
License number: 14619
NPI: 1033623293
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
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Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

ASUNCION, JENNIFER, CSW

Provider Gender: Male
License number: LCSW75956
NPI: 1083056279
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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Website:
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Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

ATALLAH, HANI M , MD

Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: 132530
 NPI: 1104169655
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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 91977-1030
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 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030

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 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

AUCOIN, DOUGLAS, CSW

Provider Gender: Male
 License number: 24707
 NPI: 1699007609
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male
 License number: 75520
 NPI: 1487937330
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Portuguese, Spanish
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M-F 8:30AM-5PM

AVILA, RADOMIR M , CSW

Provider Gender: Male

License number: 75520

NPI: 1487937330

Provider English Spoken: Yes

Provider Language(s) Spoken:

Portuguese, Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

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Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

Please contact provider for
Accessibility information

*Hours: M,TU 8:30AM-5PM, W
1PM-5PM*

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male

License number: 90529

NPI: 1194159871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

Please contact provider for
Accessibility information

*Hours: M,TU 8:30AM-5PM, W
1PM-5PM*

BARCELOS ANTONIO, TIAGO, CSW

Provider Gender: Male

License number: 90529

NPI: 1194159871

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

*Gender Restriction: No Gender
Restrictions*

*American Sign Language (ASL):
Yes*

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female

License number: 86542

NPI: 1720339708

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BARTHOLOMEW, SARAH C , CSW

Provider Gender: Female

License number: 86542

NPI: 1720339708

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
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After Hours Phone: (619)

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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515-2338

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

BENNETT, RACHEL Q , CSW

Provider Gender: Female

License number: 76466

NPI: 1558659797

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female

License number: 63313

NPI: 1922305465

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BERKSON, BARRIE, CSW

Provider Gender: Female
License number: 63313
NPI: 1922305465
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BIRNBAUM, DEBORAH, MD

Provider Gender: Female
License number: 20A11387
NPI: 1639308265
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BOND, ALAN, PSY

Provider Gender: Male
License number: PSY25805
NPI: 1881927184
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	1PM-5PM BORREGO, DIANA E , NPA Provider Gender: Female License number: 95005019 NPI: 1184012866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
BOND, ALAN, PSY Provider Gender: Male License number: PSY25805 NPI: 1881927184 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W	BORREGO, DIANA E , NPA Provider Gender: Female License number: 95005019 NPI: 1184012866 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W	BUBY, MYRA, CSW Provider Gender: Female License number: 23172 NPI: 1093747511 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

BUBY, MYRA, CSW

Provider Gender: Female
License number: 23172
NPI: 1093747511
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338

Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BURGOS, EDNA, CSW

Provider Gender: Female
License number: 85597
NPI: 1134591167
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

BUTERBAUGH, KRISTY L , CSW

Provider Gender: Female
License number: 65477
NPI: 1346615838
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male

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J. Directorio de proveedores de salud mental

License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

CABREJOS, CLAUDIO, MD

Provider Gender: Male
License number: A71653
NPI: 1033133483
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD

SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARDENAS, ALONSO, MD

Provider Gender: Male
License number: A137940
NPI: 1811212145
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

CARILLO, KRYSTAL I, CSW

Provider Gender: Female
License number: 80068
NPI: 1871906735
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website: www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

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J. Directorio de proveedores de salud mental

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W

1PM-5PM

CARINO DIOKNO, RHODA, PSY

Provider Gender: Female

License number: 28073

NPI: 1629109483

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

CASTELLANOS, TERESITA D , CSW

Provider Gender: Female

License number: 82782

NPI: 1598165441

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

CHEN, ANGELA, MFT

Provider Gender: Female

License number: LMFT40923

NPI: 1811027956

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	Hours: M-F 8:30AM-5PM CHRISTENSEN, MELISSA, CSW Provider Gender: Female License number: 69616 NPI: 1922313394 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM
CHRISTENSEN, MELISSA, CSW Provider Gender: Female License number: 69616 NPI: 1922313394 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information	CHRISTENSEN, MELISSA, CSW Provider Gender: Female License number: 69616 NPI: 1922313394 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	CROCKFORD, DANE, PSY Provider Gender: Male License number: 28313 NPI: 1780031831 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338
	COMBS, LAURI, CSW Provider Gender: Female License number: LCSW75330 NPI: 1538398979 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	License number: 82240 NPI: 1841797644 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
CROCKFORD, DANE, PSY Provider Gender: Male License number: 28313 NPI: 1780031831 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99	DALONSO, SANDRA L , CSW Provider Gender: Female License number: 82240 NPI: 1841797644 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	DAN, WENDY L , CSW Provider Gender: Female License number: 26015 NPI: 1700224037 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035
DALONSO, SANDRA L , CSW Provider Gender: Female		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

DAN, WENDY L , CSW

Provider Gender: Female
License number: 26015
NPI: 1700224037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

DIAZ, LIZETH, CSW

Provider Gender: Female
License number: 97277
NPI: 1124457023
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

DOBOS, DAVID, MD

Provider Gender: Male
License number: G57276
NPI: 1548318348
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
DOBOS, DAVID, MD Provider Gender: Male License number: G57276 NPI: 1548318348 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes	DRISCOLL, MICHAEL S , CSW Provider Gender: Male License number: 93951 NPI: 1659761880 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL):	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken:	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken:	DUNFORD, KATELYN C , MFT Provider Gender: Female License number: 126626 NPI: 1437517497 Provider English Spoken: Yes Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

DWYER, GEORGE, CSW
Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

DWYER, GEORGE, CSW
Provider Gender: Male
License number: 70988
NPI: 1437606126
Provider English Spoken: Yes
Provider Language(s) Spoken:
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 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

ERBE, EDWARD J , MD
Provider Gender: Male
License number: G76886
NPI: 1952318289
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
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 91977-4035
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW
Provider Gender: Female

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J. Directorio de proveedores de salud mental

License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
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After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FAJARDO, JACQUELINE M , CSW
Provider Gender: Female
License number: 87322
NPI: 1215342118
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR

SPRING VALLEY, CA
 91977-1030
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
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 91977-1030
Phone: (619) 515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

FEDEROFF, MONICA, MD
Provider Gender: Female
License number: A164677
NPI: 1912404492
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes

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J. Directorio de proveedores de salud mental

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

FLORES, MARY LUPE, CSW

Provider Gender: Female
License number: 19815
NPI: 1134147457
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Website:

www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

FRANCO, RODRIGO, CSW

Provider Gender: Male
License number: 71548
NPI: 1952736043
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
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Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male
License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

FUKUI, TOMONORI, MD

Provider Gender: Male

License number: 75713
NPI: 1366519670
Provider English Spoken: Yes
Provider Language(s) Spoken: Japanese, Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
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 91977-1030
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken: *Cultural Competency:* FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR

SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
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Accepting New Patients: Yes
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TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

GALAPON, DIXIE L , PSY

Provider Gender: Female
License number: 16711
NPI: 1174646301
Provider English Spoken: Yes
Provider Language(s) Spoken: *Cultural Competency:* FAMILY HEALTH CENTERS OF SAN DIEGO
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Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
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515-2338
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

GAUD, KRISTINA G , MD

Provider Gender: Female
License number: 170667
NPI: 1508151598
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO
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Hours: M,TU 8:30AM-5PM, W
1PM-5PM

GLASSMAN, JAGA NATH, MD

Provider Gender: Male
License number: G55004
NPI: 1558409771
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	NPI: 1821487406 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender	GLEASON, SHEILA, PSY Provider Gender: Female License number: 13685 NPI: 1366641813 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM GONZALES, JULIANA, CSW Provider Gender: Female License number: 83254	GONZALES, JULIANA, CSW Provider Gender: Female License number: 83254 NPI: 1821487406 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

GONZALEZ, ANDREA, CSW

Provider Gender: Female

License number: 97593

NPI: 1326346198

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
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91977-1030

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

GOTTUNG, CHRISTINA, CSW

Provider Gender: Female

License number: 87716

NPI: 1134597123

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

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J. Directorio de proveedores de salud mental

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
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91977-1030

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

GUTIERREZ, APRIL P , CSW

Provider Gender: Female

License number: 86166

NPI: 1356749949

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

GUZMAN, KENIA, MFT

Provider Gender: Female

License number: 77167

NPI: 1427326776

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
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91977-1030

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

HARRIMAN, CORAL, PSY

Provider Gender: Female

License number: 26098

NPI: 1417373069

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
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91977-1030

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Accepting New Patients: Yes

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Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

HARRIMAN, CORAL, PSY

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J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: 26098
NPI: 1417373069
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
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Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HAYDEN WADE, HELEN, PSY
Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

HAYDEN WADE, HELEN, PSY
Provider Gender: Female
License number: PSY19313
NPI: 1366951105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,

Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

HEDMAN, TERI LEE, CSW
Provider Gender: U
License number: 74947
NPI: 1154811636
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

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J. Directorio de proveedores de salud mental

HORNBROOK, JESSICA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 26598 <i>NPI:</i> 1134401805 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM
HUBER, REBECCA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133711 <i>NPI:</i> 1174960686 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD	HUBER, REBECCA, MD <i>Provider Gender:</i> Female <i>License number:</i> A133711 <i>NPI:</i> 1174960686 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i>	HUDSON, KATE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 83712 <i>NPI:</i> 1194159384 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Accessibility information
Hours: M-F 8:30AM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

ISHIDA, YO, CSW

Provider Gender: Female
License number: 29526
NPI: 1225154081

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

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515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

JALAN, DEVESH, MD

Provider Gender: Male

License number: A167754

NPI: 1083092134

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
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8788 JAMACHA RD
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After Hours Phone: (619)

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

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J. Directorio de proveedores de salud mental

American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

JAMES, CHRISTINE E , MD

Provider Gender: Female
License number: 20A13931
NPI: 1679834022
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
3845 SPRING DR
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Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030

Phone: (619) 515-2338
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

JASSO-RAMIREZ, MARTHA, CSW

Provider Gender: Female
License number: 26493
NPI: 1871772020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO
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Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JENSEN, DEXTER, MD

Provider Gender: Male
License number: A67960
NPI: 1740465541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
3845 SPRING DR
SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for

Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

JONES, ADELE, PSY

Provider Gender: Female
License number: 25311
NPI: 1558602490
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:

FAMILY HEALTH CENTERS OF
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515-2338
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www.beaconhealthoptions.com
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

JONES, ATAVIA L , CSW

Provider Gender: Female
License number: LCSW76796
NPI: 1952734899
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
515-2338

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM JONES, MICHAEL A , CSW Provider Gender: Male License number: LCS 22452 NPI: 1548205719 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	NPI: 1396150041 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
JONES, MICHAEL A , CSW Provider Gender: Male License number: LCS 22452 NPI: 1548205719 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender	Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM KEI, JUSTIN, MD Provider Gender: Male License number: A138266	KEI, JUSTIN, MD Provider Gender: Male License number: A138266 NPI: 1396150041 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM
KLOBERDANZ, KELSEY L , NPA Provider Gender: Female License number: 95005293 NPI: 1235672502 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	KLOBERDANZ, KELSEY L , NPA Provider Gender: Female License number: 95005293 NPI: 1235672502 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:	KNIGHT, MARK ANTHONY, MD Provider Gender: Male License number: A94460 NPI: 1851573554 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency:

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J. Directorio de proveedores de salud mental

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SAN DIEGO
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91977-1030

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

KOH, STEVE H , MD

Provider Gender: Male

License number: A103468

NPI: 1467650473

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

License number: LCSW78555

NPI: 1174981500

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

KYLE, MARCIE, CSW

Provider Gender: Female

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J. Directorio de proveedores de salud mental

License number: LCSW78555
 NPI: 1174981500
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LEBLANC, ASHLEY B , CSW
 Provider Gender: Female
 License number: 83136
 NPI: 1275905622
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035

Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD
 Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,

Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

LIDSTONE, PAVEN, MD
 Provider Gender: Female
 License number: 161149
 NPI: 1942662093
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

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J. Directorio de proveedores de salud mental

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
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 515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIM, SANDRA S , MD

Provider Gender: Female
License number: 20A13075
NPI: 1083963094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

LIPPERT, HEATHER M , CSW

Provider Gender: Female
License number: 22526
NPI: 1093991663
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
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 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for

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J. Directorio de proveedores de salud mental

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333

NPI: 1619108511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

LOEB, CINDY, CSW

Provider Gender: Female

License number: 75333

NPI: 1619108511

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

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After Hours Phone: (619)

515-2338

Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M-F 8:30AM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

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91977-1030

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for

Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

LYDIARD, JESSICA, MD

Provider Gender: Female

License number: A171775

NPI: 1841731296

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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SPRING VALLEY, CA

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

LYONS, KEITH E , CSW

Provider Gender: Male
License number: 92724
NPI: 1538704002
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570

NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
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 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MACMASTER, LINDSAY, PSY

Provider Gender: Female
License number: 25570
NPI: 1659520179
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MAHONEY, PATRICIA A , CSW

Provider Gender: Female
License number: 22296
NPI: 1700200888
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	1PM-5PM MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
MAHONEY, PATRICIA A , CSW Provider Gender: Female License number: 22296 NPI: 1700200888 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W	MAIETTA, KATHLEEN H , CSW Provider Gender: Female License number: 88399 NPI: 1487128617 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	MARTIR, MICHEL, CSW Provider Gender: Female License number: 73174 NPI: 1356528434 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com

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J. Directorio de proveedores de salud mental

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MARTIR, MICHEL, CSW

Provider Gender: Female
License number: 73174
NPI: 1356528434
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
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After Hours Phone: (619)
 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions

American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201
NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
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 515-2338
Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

MCADAMS, HILDA, NPA

Provider Gender: Female
License number: 14201

NPI: 1396838082
Provider English Spoken: Yes
Provider Language(s) Spoken:
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Cultural Competency:
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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

MCHENRY, KELLY, CSW

Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
 American Sign Language
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR

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J. Directorio de proveedores de salud mental

SPRING VALLEY, CA
91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MCHENRY, KELLY, CSW
Provider Gender: Female
License number: 29689
NPI: 1851544340
Provider English Spoken: Yes
Provider Language(s) Spoken:
American Sign Language
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

MEJIA, RITA I , MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM
MEJIA, RITA I , MFT
Provider Gender: Female
License number: 99697
NPI: 1952741506
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:

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J. Directorio de proveedores de salud mental

Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MENDEZ, ANDRES G , PSY
Provider Gender: Male
License number: 28907
NPI: 1841482692
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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After Hours Phone: (619) 515-2338

Website:
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
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Accepting New Patients: Yes
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Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions

Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MERRILL, SARAH M , CSW
Provider Gender: Female
License number: 79014
NPI: 1639403884
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354

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J. Directorio de proveedores de salud mental

NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MILLICAN, RUTH, PSY
Provider Gender: Female
License number: 25354
NPI: 1346472305
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030

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After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
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After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

MODAD, ALBERT, PSY
Provider Gender: Female
License number: 29697
NPI: 1629453691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W

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J. Directorio de proveedores de salud mental

1PM-5PM

**MORALES MORENO,
MINERVA, CSW**

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

**MORALES MORENO,
MINERVA, CSW**

Provider Gender: Female

License number: 63550

NPI: 1841337565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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After Hours Phone: (619)

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male

License number: A144917

NPI: 1912391814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
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515-2338

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

MORRISON, TYLER E , MD

Provider Gender: Male

License number: A144917

NPI: 1912391814

Provider English Spoken: Yes

Provider Language(s) Spoken:

Japanese

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

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J. Directorio de proveedores de salud mental

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

MUNOZ, VIVIANA, CSW

Provider Gender: Female
License number: 66637
NPI: 1497987713
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

NADEAU MANNING, JULIE,

CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No

Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

NADEAU MANNING, JULIE, CSW

Provider Gender: Female
License number: 25094
NPI: 1275609760
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR

SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

NAZARIO, JACOBETH, PSY

Provider Gender: Female
License number: PSY32092
NPI: 1326648684
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM	Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M,TU 8:30AM-5PM, W 1PM-5PM
NAZARIO, JACOBETH, PSY <i>Provider Gender:</i> Female <i>License number:</i> PSY32092 <i>NPI:</i> 1326648684 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Farsi <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information <i>Hours:</i> M-F 8:30AM-5PM	NWANGANGA, OKECHUKU R , CSW <i>Provider Gender:</i> Male <i>License number:</i> 27072 <i>NPI:</i> 1285984450 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030
NOUHI, NUSHA, PSY <i>Provider Gender:</i> Female <i>License number:</i> 27670 <i>NPI:</i> 1942433917 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i>		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

NWANGANGA, OKECHUKU R , CSW

Provider Gender: Male

License number: 27072

NPI: 1285984450

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR
SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

OBRYAN, KELLY, PSY

Provider Gender: Female

License number: 24966

NPI: 1093882698

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

OLIVER, ELIZABETH, CSW

Provider Gender: Female

License number: 66862

NPI: 1326296351

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes	OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL):	PRASEK, LAUREN, NPA Provider Gender: Female License number: 95004145 NPI: 1932566031 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM
OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes	OMORODIN, AISHA, MD Provider Gender: Female License number: A169651 NPI: 1629500301 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 Phone: (619) 515-2338 Fax: (619) 702-8536 After Hours Phone: (619) 515-2338 Website: www.beaconhealthoptions.com Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese TDD: No Min/Max Age: 0/99 Gender Restriction: No Gender Restrictions American Sign Language (ASL):	PRASEK, LAUREN, NPA Provider Gender: Female License number: 95004145 NPI: 1932566031 Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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J. Directorio de proveedores de salud mental

Provider Language(s) Spoken: Phone: (866) 284-0482
Cultural Competency: Fax: (888) 977-1204
 FAMILY HEALTH CENTERS OF After Hours Phone: (866)
 SAN DIEGO 284-0482
 8788 JAMACHA RD Website:
 SPRING VALLEY, CA www.beaconhealthoptions.com
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PRESLEY, ARNOLD S , PSY

Provider Gender: Male
License number: 23795
NPI: 1205017688
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency:
 CONCEPT HEALTHCARE
 PSYCHOLOGY GROUP
 325 KEMPTON ST
 SPRING VALLEY, CA
 91977-5810

Phone: (866) 284-0482
Fax: (888) 977-1204
After Hours Phone: (866)
 284-0482
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-F 8AM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No

Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

PROCTOR, MELISSA S , CSW

Provider Gender: Female
License number: 62650
NPI: 1336188655
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
 Phone: (619) 515-2338
 Fax: (619) 702-8536
 After Hours Phone: (619)
 515-2338
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 American Sign Language, Farsi,
 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
 TDD: No
 Min/Max Age: 0/99
 Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
 Hours: M-F 8:30AM-5PM

PROOSASELTS, YULIYA, MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M,TU 8:30AM-5PM, W 1PM-5PM

PROOSASELTS, YULIYA, MD
Provider Gender: Female
License number: A133675
NPI: 1952747875
Provider English Spoken: Yes
Provider Language(s) Spoken: Russian
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW
Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 8788 JAMACHA RD
 SPRING VALLEY, CA
 91977-4035
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

RAMOS, ELIZABETH, CSW
Provider Gender: Female
License number: 73374
NPI: 1992046890
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
 FAMILY HEALTH CENTERS OF SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
 91977-1030
Phone: (619) 515-2338
Fax: (619) 702-8536
After Hours Phone: (619) 515-2338
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	<i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM
RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 <i>NPI:</i> 1568656619 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	RODRIGUEZ, CHRISTINE, PSY <i>Provider Gender:</i> Female <i>License number:</i> 30472 <i>NPI:</i> 1568656619	ROSENFARB, BARBARA, CSW <i>Provider Gender:</i> Female <i>License number:</i> 28590 <i>NPI:</i> 1447477781 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi,

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J. Directorio de proveedores de salud mental

Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO
8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

ROZELL, KATHY, CSW

Provider Gender: Female
License number: 25068
NPI: 1578603973
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
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Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF
SAN DIEGO

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
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Hours: M-F 8:30AM-5PM

SACHS, MELISSA R , CSW

Provider Gender: Female
License number: 76968
NPI: 1649760356
Provider English Spoken: Yes
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515-2338
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes

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J. Directorio de proveedores de salud mental

Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

SAMADI, ESTHER, MD

Provider Gender: Female

License number: A113657

NPI: 1396986204

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information
Hours: M,TU 8:30AM-5PM, W
1PM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M-F 8:30AM-5PM

SEPULVEDA, JOE, MD

Provider Gender: Male

License number: A113283

NPI: 1306165402

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency:

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Accepting New Patients: Yes

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American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
Yes

Please contact provider for
Accessibility information

Hours: M,TU 8:30AM-5PM, W
1PM-5PM

SIMPSON, JENNIFER, CSW

Provider Gender: Female

License number: 82678

NPI: 1740765866

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF
SAN DIEGO

8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

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J. Directorio de proveedores de salud mental

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

SIPIN, ELVIRA P , CSW

Provider Gender: Female

License number: LCS15308

NPI: 1477759892

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

STEWART, ANDREA M , MFT

Provider Gender: U

License number: 45174

NPI: 1508993122

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

TAHBAZ, ASH, MFT

Provider Gender: U

License number: 87601

NPI: 1205294543

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female

License number: 21573

NPI: 1437354875

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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J. Directorio de proveedores de salud mental

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 American Sign Language, Farsi,
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 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

THICKSTUN, MARY SUSAN, CSW

Provider Gender: Female
License number: 21573
NPI: 1437354875
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 Yes
 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

THIESSEN, BRUCE L , PSY

Provider Gender: U
License number: 14259
NPI: 1841541984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
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 Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Yes
 Please contact provider for
 Accessibility information
Hours: M-F 8:30AM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish, Yue Chinese
Cultural Competency:
 FAMILY HEALTH CENTERS OF
 SAN DIEGO
 3845 SPRING DR
 SPRING VALLEY, CA
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Site Language(s) Spoken:
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 Japanese, Portuguese, Russian,
 Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
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 Please contact provider for
 Accessibility information
Hours: M,TU 8:30AM-5PM, W
 1PM-5PM

TONG, GARRICK, MD

Provider Gender: Male
License number: A102192
NPI: 1831361278

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J. Directorio de proveedores de salud mental

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency:
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TORRES, LAURA, CSW

Provider Gender: Female
License number: 65059
NPI: 1568612943
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information
Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
FAMILY HEALTH CENTERS OF SAN DIEGO
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Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
 Please contact provider for Accessibility information

Japanese, Portuguese, Russian, Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
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Hours: M-F 8:30AM-5PM

TRIANA, JENNIFER, CSW

Provider Gender: Female
License number: 88589
NPI: 1073844460
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency:
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TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): Yes
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J. Directorio de proveedores de salud mental

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

TROYER, EMILY, PSY

Provider Gender: Female

License number: A149101

NPI: 1326484437

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

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Website:

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W 1PM-5PM

WAUGH, BRANDON, CSW

Provider Gender: Male

License number: 83457

NPI: 1619459187

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

WEAVER, JHOSMARA A , CSW

Provider Gender: Female

License number: 77233

NPI: 1982848594

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

WEBSTER, KRISTIN K , CSW

Provider Gender: Female

License number: LCSW16118

NPI: 1902336837

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

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Accepting New Patients: Yes

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Site Language(s) Spoken:

American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

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J. Directorio de proveedores de salud mental

Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	<i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 3845 SPRING DR SPRING VALLEY, CA 91977-1030 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M,TU 8:30AM-5PM, W 1PM-5PM	<i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM
WEBSTER, KRISTIN K , CSW <i>Provider Gender:</i> Female <i>License number:</i> LCSW16118 <i>NPI:</i> 1902336837 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian, Spanish, Yue Chinese <i>TDD:</i> No <i>Min/Max Age:</i> 0/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> Yes Please contact provider for Accessibility information Hours: M-F 8:30AM-5PM	WITT, ANNETTE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 15770 <i>NPI:</i> 1912263468 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035	WOLF, CELIA C , NPA <i>Provider Gender:</i> Female <i>License number:</i> 95001899 <i>NPI:</i> 1245635564 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> FAMILY HEALTH CENTERS OF SAN DIEGO 8788 JAMACHA RD SPRING VALLEY, CA 91977-4035 <i>Phone:</i> (619) 515-2338 <i>Fax:</i> (619) 702-8536 <i>After Hours Phone:</i> (619) 515-2338 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> American Sign Language, Farsi, Japanese, Portuguese, Russian,
WITT, ANNETTE, CSW <i>Provider Gender:</i> Female <i>License number:</i> 15770 <i>NPI:</i> 1912263468 <i>Provider English Spoken:</i> Yes		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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J. Directorio de proveedores de salud mental

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

WOOD, KEEGAN, NPA

Provider Gender: Male

License number: NP95006887

NPI: 1417471459

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

3845 SPRING DR

SPRING VALLEY, CA

91977-1030

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M,TU 8:30AM-5PM, W

1PM-5PM

YALYSHAVA, VOLHA, CSW

Provider Gender: Female

License number: LCSW69810

NPI: 1821392002

Provider English Spoken: Yes

Provider Language(s) Spoken: Russian

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

American Sign Language, Farsi,

Japanese, Portuguese, Russian,

Spanish, Yue Chinese

TDD: No

Min/Max Age: 0/99

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): Yes

Please contact provider for Accessibility information

Hours: M-F 8:30AM-5PM

ZAYAS, GILBERTO, MD

Provider Gender: Male

License number: A136760

NPI: 1508174970

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency:

FAMILY HEALTH CENTERS OF SAN DIEGO

8788 JAMACHA RD

SPRING VALLEY, CA

91977-4035

Phone: (619) 515-2338

Fax: (619) 702-8536

After Hours Phone: (619)

515-2338

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J. Directorio de proveedores de salud mental

Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
American Sign Language, Farsi,
Japanese, Portuguese, Russian,
Spanish, Yue Chinese
TDD: No
Min/Max Age: 0/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
Yes
Please contact provider for
Accessibility information
Hours: M-F 8:30AM-5PM

VALLEY CENTER

KARP, MICHAEL, MFT
Provider Gender: Male
License number: 16939
NPI: 1376588541
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
KARP, MICHAEL
12115 MESA VERDE DR
VALLEY CENTER, CA
92082-5063
Phone: (760) 913-9003
Fax: (760) 749-1658
After Hours Phone: (760)
913-9003
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age: 19/99
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

No
Please contact provider for
Accessibility information
Hours: M,TU 9AM-6PM, W
2PM-6PM, TH,F 9AM-12PM

VISTA

ACOSTA, AZUCENA, CSW
Provider Gender: Female
License number: 98304
NPI: 1255937496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

ACOSTA, AZUCENA, CSW
Provider Gender: Female
License number: 98304

NPI: 1255937496
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

BERENSON, LAURIE E , PSY
Provider Gender: Female
License number: 12568
NPI: 1104956556
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
BERENSON, LAURIE
450 S MELROSE DR STE 113
VISTA, CA 92081-6674
Phone: (760) 224-4333
Fax: (760) 301-0044
After Hours Phone: (760)
224-4333

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

<i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> TDD: No <i>Min/Max Age:</i> 19/99 <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 9AM-5PM, TU 9AM-2:30PM, W,TH 9AM-4:30PM, F 1PM-4:30PM CHAUDHRI, YASHWANT, MD <i>Provider Gender:</i> Male <i>License number:</i> A67679 <i>NPI:</i> 1043258429 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM CHRISTIANSON II, WARREN R , MD <i>Provider Gender:</i> Male <i>License number:</i> 20A9664 <i>NPI:</i> 1932359445 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004	No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM CHAUDHRI, YASHWANT, MD <i>Provider Gender:</i> Male <i>License number:</i> A67679 <i>NPI:</i> 1043258429 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Hindi, Urdu <i>Cultural Competency:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M-TH 8AM-7PM, F 8AM-5PM CHRISTIANSON II, WARREN R , MD <i>Provider Gender:</i> Male <i>License number:</i> 20A9664	<i>NPI:</i> 1932359445 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> VISTA COMMUNITY CLINIC 1000 VALE TERRACE DR VISTA, CA 92084-5218 <i>Phone:</i> (760) 631-5000 <i>Fax:</i> (760) 414-3892 <i>After Hours Phone:</i> (760) 631-5000 <i>Website:</i> www.beaconhealthoptions.com <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese TDD: No <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Hours:</i> M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM CHRISTIANSON II, WARREN R , MD <i>Provider Gender:</i> Male <i>License number:</i> 20A9664 <i>NPI:</i> 1932359445 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> VISTA COMMUNITY CLINIC 134 GRAPEVINE RD VISTA, CA 92083-4004
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Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

CRUZ, VANESSA, CSW

Provider Gender: Female
 License number: 87166
 NPI: 1285170662
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese

TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

CRUZ, VANESSA, CSW

Provider Gender: Female
 License number: 87166
 NPI: 1285170662
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

DEMALLIE, DIANE A , MD

Provider Gender: Female
 License number: 55982
 NPI: 1437162898
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

DEMALLIE, DIANE A , MD

Provider Gender: Female
 License number: 55982
 NPI: 1437162898
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004

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J. Directorio de proveedores de salud mental

Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

DESOCIO, KAREN, CSW

Provider Gender: Female
 License number: 18451
 NPI: 1497727820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,

Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

DESOCIO, KAREN, CSW

Provider Gender: Female
 License number: 18451
 NPI: 1497727820
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F

8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
 License number: 26686
 NPI: 1003194960
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Website:
 www.beaconhealthoptions.com
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
 TDD: No
 Min/Max Age:
 Gender Restriction: No Gender
 Restrictions
 American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
 Hours: M-TH 8AM-7PM, F
 8AM-5PM

DOUGHERTY, CHRISTINE, CSW

Provider Gender: Female
 License number: 26686
 NPI: 1003194960
 Provider English Spoken: Yes
 Provider Language(s) Spoken:
 Cultural Competency:
 VISTA COMMUNITY CLINIC

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J. Directorio de proveedores de salud mental

1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GIORGIO, CHRISTINA, CSW

Provider Gender: Female
License number: 101690
NPI: 1457786774
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W

8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

GODINEZ, BRENDA, CSW

Provider Gender: Female
License number: 88306
NPI: 1568918647
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

GUERRERO, ADRIANA J , CSW

Provider Gender: Female
License number: LCSW86435
NPI: 1356777361

Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female
License number: 95006826
NPI: 1619246907

Provider English Spoken: Yes
Provider Language(s) Spoken:
Mandarin, Chinese

Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000

Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

HALGEDAHL, YI TING, NPA

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 95006826
NPI: 1619246907
Provider English Spoken: Yes
Provider Language(s) Spoken: Mandarin, Chinese
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
License number: 23183
NPI: 1639687726
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil, Telugu
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M-TH 8AM-7PM, F 8AM-5PM

JAGANNATH, NIRMALA, CSW

Provider Gender: Female
License number: 23183
NPI: 1639687726
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Tamil, Telugu
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M 8AM-7PM, W

Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M 8AM-7PM, W 8AM-6:30PM, TH 8:30AM-7PM, F 8:30AM-12PM, SA 9AM-4PM

KONG, DARREN, CSW

Provider Gender: Male
License number: 88493
NPI: 1447685078
Provider English Spoken: Yes
Provider Language(s) Spoken: Khmer
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Mandarin, Hindi, Khmer, Spanish, Tamil, Telugu, Urdu, Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Hours: M 8AM-7PM, W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

KONG, DARREN, CSW

Provider Gender: Male

License number: 88493

NPI: 1447685078

Provider English Spoken: Yes

Provider Language(s) Spoken:
Khmer

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

MEYERHOF, GRETA, MFT

Provider Gender: Female

License number: 32299

NPI: 1487196333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

MEYERHOF, GRETA, MFT

Provider Gender: Female

License number: 32299

NPI: 1487196333

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

MILLS, DONNA M , MD

Provider Gender: Female

License number: A51160

NPI: 1831115658

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M 8AM-7PM, W

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

MILLS, DONNA M , MD

Provider Gender: Female

License number: A51160

NPI: 1831115658

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

MOTAGHED, HENGAMEH, PSY

Provider Gender: Female

License number: 12707

NPI: 1366550592

Provider English Spoken: Yes

Provider Language(s) Spoken:

Farsi

Cultural Competency:

MOTAGHED, HENGAMEH

550 W VISTA WAY STE 107
VISTA, CA 92083-5707

Phone: (858) 922-4959

Fax: (619) 294-8190

After Hours Phone: (858)

922-4959

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Farsi

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: W 8AM-8PM

NAVA, PETER B , NPA

Provider Gender: Male

License number: 95016584

NPI: 1689251571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M-TH 8AM-7PM, F
8AM-5PM

NAVA, PETER B , NPA

Provider Gender: Male

License number: 95016584

NPI: 1689251571

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

NEVILLE, MARGARET, CSW

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

NEVILLE, MARGARET, CSW

Provider Gender: Female
License number: 82407
NPI: 1073682407
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

PLACEK, KAREL, MD

Provider Gender: Male
License number: A42838
NPI: 1124127675
Provider English Spoken: Yes
Provider Language(s) Spoken:
Czech
Cultural Competency:
MENTAL HEALTH SYSTEMS
INC
550 W VISTA WAY STE 407
VISTA, CA 92083-5714
Phone: (760) 758-1092
Fax: (760) 758-8481
After Hours Phone: (760) 758-1092
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Czech
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 8AM-4:30PM

RINGEL, BRENDA L, MD

Provider Gender: Female
License number: A65800
NPI: 1689869976
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
EXODUS RECOVERY, INC.
524 W VISTA WAY
VISTA, CA 92083-5704
Phone: (760) 758-1150
Fax: (760) 758-1808
After Hours Phone: (760) 758-1150
Website:
www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-F 9AM-5PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000

Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

SANCHEZ, ADRIANA, CSW

Provider Gender: Female
License number: 97093
NPI: 1609450451
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SMITH, SONYA L , CSW

Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Hours: M 8AM-7PM, W
8AM-6:30PM, TH 8:30AM-7PM,
F 8:30AM-12PM, SA 9AM-4PM

SMITH, SONYA L , CSW

Provider Gender: Female
License number: 82598
NPI: 1902070857
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website:
www.beaconhealthoptions.com

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Mandarin, Hindi, Khmer,
Spanish, Tamil, Telugu, Urdu,
Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Hours: M-TH 8AM-7PM, F
8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:
VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

SWENSON, ING E , CSW

Provider Gender: Male
License number: 28549
NPI: 1063680650
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 1000 VALE TERRACE DR
 VISTA, CA 92084-5218
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

Accessibility information
Hours: M 8AM-7PM, W
 8AM-6:30PM, TH 8:30AM-7PM,
 F 8:30AM-12PM, SA 9AM-4PM

WILSON, CARLENE, CSW

Provider Gender: Female
License number: 74685
NPI: 1508327081
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency:
VISTA COMMUNITY CLINIC
 134 GRAPEVINE RD
 VISTA, CA 92083-4004
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website:
 www.beaconhealthoptions.com
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Mandarin, Hindi, Khmer,
 Spanish, Tamil, Telugu, Urdu,
 Chinese
TDD: No
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Hours: M-TH 8AM-7PM, F
 8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female
License number: 26061
NPI: 1154705598
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

J. Directorio de proveedores de salud mental

Cultural Competency:

VISTA COMMUNITY CLINIC

1000 VALE TERRACE DR

VISTA, CA 92084-5218

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M 8AM-7PM, W

8AM-6:30PM, TH 8:30AM-7PM,

F 8:30AM-12PM, SA 9AM-4PM

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Mandarin, Hindi, Khmer,

Spanish, Tamil, Telugu, Urdu,

Chinese

TDD: No

Min/Max Age:

Gender Restriction: No Gender

Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Hours: M-TH 8AM-7PM, F

8AM-5PM

ZAPPONE, ALIDA, CSW

Provider Gender: Female

License number: 26061

NPI: 1154705598

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency:

VISTA COMMUNITY CLINIC

134 GRAPEVINE RD

VISTA, CA 92083-4004

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000

Website:

www.beaconhealthoptions.com

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

ALPINE

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103

Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU

10AM-6PM, TH 8AM-5PM, F 9AM-4PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

KATZMAN, BARRY, MD
Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

KIM, HEAWON, OD
Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

MILLER, DOUGLAS G , MD
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

MORRISON REYES, JOSHUA, MD

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

PRABHU, SUJATA P , MD

Provider Gender: Female

License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 1620 ALPINE BLVD STE 117
 ALPINE, CA 91901-1103
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9AM-5PM, TU 10AM-6PM, TH 8AM-5PM, F 9AM-4PM

BONITA

CHA, DANIEL D , OD

Provider Gender: Male
License number: 14779
NPI: 1386078020
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
EYECARE OF BONITA
 4502 BONITA RD
 BONITA, CA 91902-1427
Phone: (619) 479-7334
Fax: (619) 475-3456
After Hours Phone:
Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site English Spoken: Yes
Site Language(s) Spoken:
 Korean, Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M 8AM-6:30PM, W,F
 8AM-6PM, TH 12:30PM-6PM,
 SA 9AM-2PM

KIKUNAGA, HENRY E , OD
Provider Gender: Male
License number: 13186
NPI: 1841406394
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM, SA
 8AM-12PM

PACK, ALYSSA, OD
Provider Gender: Female
License number: 34608
NPI: 1750991220
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400
Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM, SA
 8AM-12PM

TRAJANO, CHARMINE D , OD
Provider Gender: Female
License number: 14993
NPI: 1699183673
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Tagalog
 Cultural Competency: Yes
 BONITA POINT FAMILY
 OPTOMETRY
 180 OTAY LAKES RD STE 201
 BONITA, CA 91902-2400

Phone: (619) 267-9900
Fax: (619) 267-9910
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* Yes
Hours: M-F 8AM-5PM, SA
 8AM-12PM

CAMPO

YANG, HARRISON H , OD
Provider Gender: Male
License number: 33964
NPI: 1053806307
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 SAN YSIDRO HEALTH
 1388 BUCKMAN SPRINGS RD
 CAMPO, CA 91906-2028
Phone: (619) 662-4100
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Chinese
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-5PM

CARLSBAD

MORGAN, HUNTER, OD

Provider Gender: Male
License number: 34799
NPI: 1023547221
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
BEYOND VISION CENTER
OPTOMETRY, INC.
6949 EL CAMINO REAL STE 105
CARLSBAD, CA 92009-4140
Phone: (760) 438-2020
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-6PM

RAJADHYKSHA, SALOMI, OD

Provider Gender: Female
License number: 34821
NPI: 1134641434
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Yiddish
Cultural Competency: Yes

BEYOND VISION CENTER
OPTOMETRY, INC.
6949 EL CAMINO REAL STE 105
CARLSBAD, CA 92009-4140
Phone: (760) 438-2020
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-6PM

SHARMA, GURU D , OD

Provider Gender: Male
License number: 13675
NPI: 1427484138
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: Yes
EYE STYLE OPTOMETRY
5814 VAN ALLEN WAY STE 146
CARLSBAD, CA 92008-7359
Phone: (442) 244-5227
Fax: (442) 287-8092
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SA,SU 12PM-5PM, M-F 10AM-6PM

CHULA VISTA

BERGMARK, JAMIE L , OD

Provider Gender: Female
License number: 33657
NPI: 1669920757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION - TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM

BIANES, BEVERLY P , OD

Provider Gender: Female
License number: 9841
NPI: 1285692756

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION - EASTLAKE
 890 EASTLAKE PKWY STE 102
 CHULA VISTA, CA 91914-4521
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM

BIANES, BEVERLY P , OD

Provider Gender: Female
License number: 9841
NPI: 1285692756
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION - TERRA NOVA
 374 E H ST STE 1708
 CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM

CASTILLEJOS, DAVID, MD

Provider Gender: Male
License number: A44482
NPI: 1558446401
Provider English Spoken: Yes
Provider Language(s) Spoken:
 French, Portuguese, Spanish, Tagalog
Cultural Competency: Yes
CASTILLEJOS EYE INSTITUTE MED GROUP
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 French, Portuguese, Spanish, Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,F 8AM-5PM, TU,TH 7AM-5PM

CASTILLEJOS, MARIA E , MD

Provider Gender: Female
License number: A37652
NPI: 1043395098
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
CASTILLEJOS EYE INSTITUTE MED GROUP
 342 F ST
 CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 French, Portuguese, Spanish, Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,F 8AM-5PM, TU,TH 7AM-5PM

HUANG, FLORA, OD

Provider Gender: Female
License number: 34082
NPI: 1487137105
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Chinese
Cultural Competency: Yes
PACK & BIANES VISION - TERRA NOVA
 374 E H ST STE 1708
 CHULA VISTA, CA 91910-7492

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-5PM, SA
8:30AM-1PM

HUANG, PETER D , OD

Provider Gender: Male
License number: 11659
NPI: 1639100522
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910-4330
Phone: (619) 422-0139
Fax: (619) 422-0066
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

mile from Site): Yes
Hours: M,W 9AM-5PM, TU,TH
9AM-6PM, F 8AM-4PM, SA
9AM-2PM

KALRA, ANKUR, OD

Provider Gender: Male
License number: 11898
NPI: 1124195789
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: Yes
OTAY RANCH EYEWORKS
OPTOMETRY
1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: SU 10AM-4PM, M-F
9AM-7PM, SA 9AM-5PM

KEDDINGTON, JOAN, OD

Provider Gender: Female
License number: 6263
NPI: 1992872691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes

OTAY RANCH EYEWORKS
OPTOMETRY
1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: SU 10AM-4PM, M-F
9AM-7PM, SA 9AM-5PM

KING, MARY M , OD

Provider Gender: Female
License number: 13711
NPI: 1578792107
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
OTAY RANCH EYEWORKS
OPTOMETRY
1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Spanish
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

LEE, RACHEL J , OD

Provider Gender: Female
License number: 14986
NPI: 1619379278
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
License number: 10906

NPI: 1457507279
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
CLEAR VISION OPTOMETRY
DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910-4443
Phone: (619) 427-2020
Fax: (866) 254-5707
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-TH 9AM-6PM, F 9AM-5PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
License number: 10906
NPI: 1457507279
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
EASTLAKE VISION CENTER
DR MASCARENO
2260 OTAY LAKES RD STE 111
CHULA VISTA, CA 91915-1007
Phone: (619) 421-5550
Fax: (619) 421-6022
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-3PM

MENDOZA, MARLON, OD

Provider Gender: Male
License number: 34896
NPI: 1578233359
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

PACK, ALYSSA, OD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Female License number: 34608 NPI: 1750991220 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521 Phone: (619) 216-3937 Fax: (619) 216-9041 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM	Site Language(s) Spoken: Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM	8:30AM-1PM PACK, JOHN C , OD Provider Gender: Male License number: 9684 NPI: 1598723587 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521 Phone: (619) 216-3937 Fax: (619) 216-9041 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM
PACK, ALYSSA, OD Provider Gender: Female License number: 34608 NPI: 1750991220 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492 Phone: (619) 425-7990 Fax: (619) 425-7992 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA	PACK, JOHN C , OD Provider Gender: Male License number: 9684 NPI: 1598723587 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: Yes PACK & BIANES VISION - TERRA NOVA 374 E H ST STE 1708 CHULA VISTA, CA 91910-7492 Phone: (619) 425-7990 Fax: (619) 425-7992 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA	PEREZ, JUDI A , OD Provider Gender: Female License number: 13210 NPI: 1477616746 Provider English Spoken: Yes Provider Language(s) Spoken: Spanish Cultural Competency: Yes PACK & BIANES VISION - EASTLAKE 890 EASTLAKE PKWY STE 102 CHULA VISTA, CA 91914-4521

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: TU,W,F 9AM-6PM, TH
10AM-6PM, SA 8:30AM-1PM

PEREZ, JUDI A , OD

Provider Gender: Female
License number: 13210
NPI: 1477616746
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
PACK & BIANES VISION -
TERRA NOVA
374 E H ST STE 1708
CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM,
TU 8:30AM-5PM, SA
8:30AM-1PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female
License number: 33711
NPI: 1184146094
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
CASTILLEJOS EYE INSTITUTE
MED GROUP
342 F ST
CHULA VISTA, CA 91910-2625
Phone: (619) 422-1471
Fax: (619) 271-7044

After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,W,F 8AM-5PM, TU,TH
7AM-5PM

TAN, JOCELYN, OD

Provider Gender: Female
License number: 33985
NPI: 1053724112
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes

OTAY RANCH EYEWORKS
OPTOMETRY
1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi,
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: SU 10AM-4PM, M-F
9AM-7PM, SA 9AM-5PM

THACH, QUEEN, OD

Provider Gender: Female
License number: 33685
NPI: 1053841478
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PACK & BIANES VISION -
EASTLAKE
890 EASTLAKE PKWY STE 102
CHULA VISTA, CA 91914-4521
Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM

THACH, QUEEN, OD

Provider Gender: Female
License number: 33685
NPI: 1053841478
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 PACK & BIANES VISION - TERRA NOVA
 374 E H ST STE 1708
 CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM

THAI, AMANDA, OD

Provider Gender: Female
License number: 34861
NPI: 1457928558
Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: Yes
 OTAY RANCH EYEWORKS OPTOMETRY
 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

THAI, EMILY, OD

Provider Gender: Female
License number: 34649
NPI: 1720699432
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 OTAY RANCH EYEWORKS OPTOMETRY
 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male
License number: 33758
NPI: 1740701481
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: Yes
 OTAY RANCH EYEWORKS OPTOMETRY
 1741 EASTLAKE PKWY STE 101
 CHULA VISTA, CA 91915-2032
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Hindi, Spanish

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: SU 10AM-4PM, M-F 9AM-7PM, SA 9AM-5PM

TRAJANO, CHARMINE D , OD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Female
License number: 14993
NPI: 1699183673
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: Yes
PACK & BIANES VISION - TERRA NOVA
 374 E H ST STE 1708
 CHULA VISTA, CA 91910-7492
Phone: (619) 425-7990
Fax: (619) 425-7992
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W-F 8:30AM-5:30PM, TU 8:30AM-5PM, SA 8:30AM-1PM

TRAJANO, CHARMINE D , OD
Provider Gender: Female
License number: 14993
NPI: 1699183673
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog
Cultural Competency: Yes
PACK & BIANES VISION - EASTLAKE
 890 EASTLAKE PKWY STE 102
 CHULA VISTA, CA 91914-4521

Phone: (619) 216-3937
Fax: (619) 216-9041
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: TU,W,F 9AM-6PM, TH 10AM-6PM, SA 8:30AM-1PM

VILLA, ANGELICA M , OD
Provider Gender: Female
License number: 10561
NPI: 1962544965
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
VILLA OPTOMETRY INC
 531 TELEGRAPH CANYON RD
 CHULA VISTA, CA 91910-6436
Phone: (619) 482-2020
Fax: (619) 482-2671
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): Yes
Hours: M-F 9AM-6PM, SA 9AM-1PM

CORONADO

KATZMAN, LEE R , MD
Provider Gender: Male
License number: A135673
NPI: 1912297284
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ALVARADO EYE ASSOCIATES MED CLINIC INC
 801 ORANGE AVE STE 204
 CORONADO, CA 92118-2663
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W,TH 9AM-4:30PM, TU 9AM-3PM

EL CAJON

AOTO, KIM N , OD
Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No

Hours: M-F 8:30AM-6PM
BERGMARK, JAMIE L , OD
Provider Gender: Female
License number: 33657
NPI: 1669920757
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
MAIN STREET OPTOMETRY
303 E MAIN ST
EL CAJON, CA 92020-3913
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours:

BINDER, NICHOLAS, MD
Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM

BUTLER, KIM J , OD
Provider Gender: Male
License number: 6405
NPI: 1467444844
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
KIM J BUTLER OD
1273 BROADWAY
EL CAJON, CA 92021-4902
Phone: (619) 579-2345
Fax: (619) 579-0876
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-5PM, SA
9AM-12PM

CHAN, KWOK FUNG, OD
Provider Gender: Male
License number: 35087
NPI: 1407508385
Provider English Spoken: Yes
Provider Language(s) Spoken:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Cultural Competency: Yes
WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
 EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU 10AM-5PM, F 8AM-2PM

CHENG, PATTY L , OD
Provider Gender: Female
License number: 12249
NPI: 1265526263
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

DYER, SHARON M , OD
Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

KATZMAN, BARRY, MD
Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

KIM, HEAWON, OD
Provider Gender: Female
License number: 34584TLG

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 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No

Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM
MCMURREN, BRITTANY J , OD
Provider Gender: Female
License number: 14824
NPI: 1104243815
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
 EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian,
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU
 10AM-5PM, F 8AM-2PM

MILLER, DOUGLAS G , MD
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520

MILLER, DOUGLAS G , MD
Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520

Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-6PM

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 450 FLETCHER PKWY STE 112
 EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

WEISS, LISA M , OD

Provider Gender: Female
License number: 11405
NPI: 1790867091
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: Yes
MAIN STREET OPTOMETRY
 303 E MAIN ST
 EL CAJON, CA 92020-3913
Phone: (619) 444-1153
Fax: (619) 444-1154
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours:

WERNER, R AARON, OD

Provider Gender: Male
License number: 13478
NPI: 1821259458
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WERNER OPTOMETRY
 2650 JAMACHA RD STE 155
 EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU 10AM-5PM, F 8AM-2PM

WERNER, REX A , OD

Provider Gender: Male
License number: 9378
NPI: 1891760716
Provider English Spoken: Yes
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: Yes
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019-4319
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Italian, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,W,TH 9AM-5PM, TU 10AM-5PM, F 8AM-2PM

ZVANUT, DONALD R , OD

Provider Gender: Male
License number: 8642
NPI: 1336211804
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
450 FLETCHER PKWY STE 112

EL CAJON, CA 92020-2520
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-6PM

ENCINITAS

ADAMS, MONA N , OD

Provider Gender: Female
License number: 14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

AOTO, KIM N , OD

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

BANSAL, PREETI, MD
Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M-F 8AM-5PM
BHATIA, SHAGUN, MD
Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

CHANG, TOM S , MD
Provider Gender: Male
License number: A69909
NPI: 1609848969
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

DEAN, MOENA, OD
Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

DUONG, KIM S , OD
Provider Gender: Female

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

License number: 34222
NPI: 1114448651
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

DYER, SHARON M , OD
Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HUDSON, HENRY L , MD
Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

KIM, HEAWON, OD
Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

LEE, JASON, OD
Provider Gender: Male
License number: 14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-5PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

MOLL, ANGELA, MD

Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License number: A73282
NPI: 1235287947
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-5PM

SAMUEL, MICHAEL A , MD

Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

SCHER, COLIN A , MD
Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS HOSPITAL
ENCINITAS
477 N EL CAMINO REAL STE
D302
ENCINITAS, CA 92024-1374
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M-F 8AM-5PM
SCOTTI, FRANK A , MD
Provider Gender: Male
License number: G40698
NPI: 1801824313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

TRAN, THAO P , OD
Provider Gender: Female
License number: 12867
NPI: 1962581421
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
KINDERSPECS-GOOD EYES
OPTOMETRY
267 N EL CAMINO REAL STE D
ENCINITAS, CA 92024-5366

Phone: (760) 753-3665
Fax: (408) 969-1653
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-TH 10AM-4:30PM, F
11AM-4PM

VINH, JOHN B , OD
Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024-5139
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Hours: M-F 8AM-5PM

ESCONDIDO

ADAMS, MONA N , OD

Provider Gender: Female

License number: 14457

NPI: 1942564521

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY STE
200

ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

AOTO, KIM N , OD

Provider Gender: Female

License number: 14524

NPI: 1780935650

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Yes

WEST COAST EYE CARE

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): No

Hours:

BANSAL, PREETI, MD

Provider Gender: Female

License number: A90890

NPI: 1871664631

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: Yes

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY STE
200

ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License number: A154902

NPI: 1104237353

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY STE
200

ESCONDIDO, CA 92029-4159

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 8:30AM-4:30PM

CHENG, PATTY L , OD

Provider Gender: Female

License number: 12249

NPI: 1265526263

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

WEST COAST EYE CARE

830 W VALLEY PKWY STE 300

ESCONDIDO, CA 92025-2529

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone:

Accepting New Patients: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours:

DUONG, KIM S , OD

Provider Gender: Female
License number: 34222
NPI: 1114448651
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
 RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

KATZMAN, BARRY, MD

Provider Gender: Male

License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 830 W VALLEY PKWY STE 300
 ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours:

KLAREN, AMANDA, OD

Provider Gender: Female
License number: 12617
NPI: 1396876611
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

LEE, JASON, OD

Provider Gender: Male
License number: 14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY STE 200
 ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8:30AM-4:30PM

LE, TAM T , OD

Provider Gender: Female
License number: 12951
NPI: 1235268707
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

<i>Provider Language(s) Spoken:</i> Spanish, Vietnamese <i>Cultural Competency:</i> Yes TAM T LE OD INC 1711 E VALLEY PKWY STE 109 ESCONDIDO, CA 92027-2521 <i>Phone:</i> (760) 737-6064 <i>Fax:</i> (760) 737-6064 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish, Vietnamese <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 9AM-5:30PM, SA 10AM-2PM	<i>Restrictions</i> <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8:30AM-4:30PM	RADY CHILDRENS SPECIALISTS 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 755-7600 <i>Fax:</i> (760) 755-7699 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8:30AM-4:30PM
MOLL, ANGELA, MD <i>Provider Gender:</i> Female <i>License number:</i> A105472 <i>NPI:</i> 1861648602 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes RADY CHILDRENS SPECIALISTS 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 755-7600 <i>Fax:</i> (760) 755-7699 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender	MORRISON REYES, JOSHUA, MD <i>Provider Gender:</i> Male <i>License number:</i> A125435 <i>NPI:</i> 1235366782 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Indonesian, Spanish <i>Cultural Competency:</i> Yes WEST COAST EYE CARE 830 W VALLEY PKWY STE 300 ESCONDIDO, CA 92025-2529 <i>Phone:</i> (760) 743-5872 <i>Fax:</i> (760) 743-5879 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> No <i>Hours:</i>	O HALLORAN, HENRY, MD <i>Provider Gender:</i> Male <i>License number:</i> A73282 <i>NPI:</i> 1235287947 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> German, Spanish <i>Cultural Competency:</i> Yes RADY CHILDRENS SPECIALISTS 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029-4159 <i>Phone:</i> (760) 755-7600 <i>Fax:</i> (760) 755-7699 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i>
	MOVAGHAR, MANSOOR, MD <i>Provider Gender:</i> Male <i>License number:</i> A100897 <i>NPI:</i> 1497792220 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> <i>Cultural Competency:</i> Yes	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8:30AM-4:30PM

PANSARA, MEGHA, MD

Provider Gender: Female
License number: A143429
NPI: 1184983728
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8:30AM-4:30PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Yes

WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours:

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours:

SCHER, COLIN A , MD

Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
2125 CITRACADO PKWY STE
200
ESCONDIDO, CA 92029-4159
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8:30AM-4:30PM

THACH, TERILYN T , OD

Provider Gender: Female
License number: 11456
NPI: 1710030861
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
INSIGHT VISION OPTOMETRY
2419 E VALLEY PKWY
ESCONDIDO, CA 92027-2932

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (760) 738-9931
Fax: (760) 738-9933
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,F 9:30AM-5PM, TH
10AM-5:30PM

TONNU, ANH T , OD
Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No

Hours:
VERRET, ERIC, OD
Provider Gender: Male
License number: 11401
NPI: 1194891853
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish
Cultural Competency: Yes
ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025-4402
Phone: (760) 747-7979
Fax: (760) 747-7799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, French, Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-TH 9AM-6PM

WILLEY, MELISSA M , OD
Provider Gender: Female
License number: 14415
NPI: 1679836928
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025-2529
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours:

FALLBROOK

COLEMAN, BROOKE A , OD
Provider Gender: Female
License number: 13551
NPI: 1700040748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

CONNOR, JEFFREY, OD
Provider Gender: Male

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

License number: 33683
NPI: 1063968980
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

COOPER, MICHAEL J , OD
Provider Gender: Male
License number: 10476
NPI: 1164586244
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

DUONG, CHERYL, OD
Provider Gender: Female
License number: OPT34070
NPI: 1366935678
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

GEORGE, BRUCE D , OD
Provider Gender: Male
License number: 7696
NPI: 1356414551
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean, Spanish

Cultural Competency: Yes
BRUCE D GEORGE OD
 1102 S MAIN AVE
 FALLBROOK, CA 92028-3325
Phone: (760) 723-8417
Fax: (760) 867-2222
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M 1PM-5PM, TU 9AM-6PM, W,TH 9AM-5PM, F,SA 9AM-1PM

TEW, JOHN G , MD
Provider Gender: Male
License number: A83206
NPI: 1174593354
Provider English Spoken: Yes
Provider Language(s) Spoken: Portuguese
Cultural Competency: Yes
INLAND EYE SPECIALISTS
 521 E ELDER ST STE 102
 FALLBROOK, CA 92028-3082
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

IMPERIAL BEACH

HANONO, ABRAHAM, OD

Provider Gender: Male
License number: 14900
NPI: 1356754741
Provider English Spoken: Yes
Provider Language(s) Spoken: Hebrew, Spanish
Cultural Competency: Yes
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA
 91932-1573
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM

HANONO, HELFON, OD

Provider Gender: Male
License number: 6681
NPI: 1619942034

Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA
 91932-1573
Phone: (619) 424-9333
Fax: (619) 424-3356
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM

LA JOLLA

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

CHENG, PATTY L , OD

Provider Gender: Female
License number: 12249
NPI: 1265526263
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

CODEN, DANIEL J , MD

Provider Gender: Male
License number: G57587
NPI: 1942317508
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-4:30PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-4:30PM

HOO, PAMELA A , OD

Provider Gender: Female
License number: 11033
NPI: 1275566010
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350

Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7:30AM-5PM, SA
8AM-2PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-4:30PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

HUSTANA, LARA, OD

Provider Gender: Female
License number: 11472
NPI: 1235161597
Provider English Spoken: Yes
Provider Language(s) Spoken: French
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

KIM, HEAWON, OD

Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
License number: 33893
NPI: 1376929034
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

KULISCHAK, JOHN F , OD

Provider Gender: Male
License number: 9279
NPI: 1740205236

Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

LAM, ANNE B , OD

Provider Gender: Female
License number: 12810
NPI: 1174550768
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7:30AM-5PM, SA
8AM-2PM

LEE, SALLY S , DO

Provider Gender: Female
License number: A8088
NPI: 1457468514
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
SAN DIEGO EYE
PROFESSIONALS
9834 GENESEE AVE STE 427
LA JOLLA, CA 92037-1264
Phone: (858) 276-1013
Fax: (619) 583-4288
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
German, Chinese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 10AM-5PM

LUSBY, FRANKLIN W , MD

Provider Gender: Male
License number: G41830
NPI: 1265526180
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
LUSBY VISION INSTITUTE

9850 GENESEE AVE STE 220
LA JOLLA, CA 92037-1208
Phone: (858) 459-6200
Fax: (858) 459-2025
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 9AM-5PM

MIZOGUCHI, LIANNE T , OD

Provider Gender: Female
License number: 10104
NPI: 1619900313
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7:30AM-5PM, SA

8AM-2PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken:
Indonesian, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 8AM-4:30PM

PERRY, ARTHUR C , MD

Provider Gender: Male
License number: C37934
NPI: 1194832725
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037-1208

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-4:30PM

PRATT, STEVEN G , MD

Provider Gender: Male

License number: G32379

NPI: 1407963044

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: Yes

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037-1208

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-4:30PM

TONNU, ANH T , OD

Provider Gender: Female

License number: 11318

NPI: 1679521280

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Yes

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037-1208

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-4:30PM

VINH, JOHN B , OD

Provider Gender: Male

License number: 14177

NPI: 1003102724

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037-1208

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License number: 33869

NPI: 1790291565

Provider English Spoken: Yes

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Yes

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR

LA JOLLA, CA 92093-1350

Phone: (858) 534-6290

Fax: (858) 822-2948

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 7:30AM-5PM, SA 8AM-2PM

YU, CAROL, OD

Provider Gender: Female

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

License number: 34047
NPI: 1639697451
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Yes
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093-1350
Phone: (858) 534-6290
Fax: (858) 822-2948
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7:30AM-5PM, SA 8AM-2PM

LA MESA

AOTO, KIM N , OD
Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

ASIS, STEPHANIE, OD
Provider Gender: Female
License number: 34013
NPI: 1902383540
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950

Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM	ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942-7435 <i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM	<i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM
BAGHOUMIAN, MARINEH, OD <i>Provider Gender:</i> Female <i>License number:</i> 14842 <i>NPI:</i> 1972929438 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Armenian <i>Cultural Competency:</i> Yes ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942-7435 <i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M-F 8AM-5PM	CAHOON, BENJAMIN, OD <i>Provider Gender:</i> Male <i>License number:</i> 33877 <i>NPI:</i> 1053819557 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes ACUITY EYE GROUP 7339 EL CAJON BLVD STE J LA MESA, CA 91942-7435 <i>Phone:</i> (619) 722-8460 <i>Fax:</i> (619) 722-8465 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information	CAUCHI, CAROLINE GUERRERO, OD <i>Provider Gender:</i> Female <i>License number:</i> 6882 <i>NPI:</i> 1831268903 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Spanish <i>Cultural Competency:</i> Yes VISION SOLUTIONS OPTOMETRY 8235 UNIVERSITY AVE LA MESA, CA 91942-9326 <i>Phone:</i> (619) 461-4913 <i>Fax:</i> (888) 509-6483 <i>After Hours Phone:</i> <i>Accepting New Patients:</i> Yes <i>Site English Spoken:</i> Yes <i>Site Language(s) Spoken:</i> Spanish <i>Min/Max Age:</i> <i>Gender Restriction:</i> No Gender Restrictions <i>American Sign Language (ASL):</i> No Please contact provider for Accessibility information <i>Public transportation (within 1/2 mile from Site):</i> Yes <i>Hours:</i> M, TU 9AM-5:30PM, W 8AM-5PM, TH 9AM-6PM, F 8AM-1PM
BINDER, NICHOLAS, MD <i>Provider Gender:</i> Male <i>License number:</i> A124698 <i>NPI:</i> 1306076716 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes	CHANG, TOM S , MD <i>Provider Gender:</i> Male <i>License number:</i> A69909 <i>NPI:</i> 1609848969 <i>Provider English Spoken:</i> Yes <i>Provider Language(s) Spoken:</i> Cultural Competency: Yes EYE ASSOCIATES OF SAN	

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

CHEA, LISA, OD
Provider Gender: Female
License number: 33615
NPI: 1902341472
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

CHENG, PATTY L , OD
Provider Gender: Female
License number: 12249
NPI: 1265526263
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

CHEW, WESLEY S , OD
Provider Gender: Male
License number: 14901
NPI: 1952714446
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435

Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

CONRAD, RANDALL E , OD
Provider Gender: Male
License number: 6423
NPI: 1962617464
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
ALVARADO EYE ASSOCIATES
MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Hours: M-F 8AM-5PM

COOK, GLENN B , MD

Provider Gender: Male

License number: G63727

NPI: 1013078427

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: Yes

ALVARADO EYE ASSOCIATES MED CLINIC INC

7877 PARKWAY DR STE 100

LA MESA, CA 91942-2000

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-5PM

DANG, JENNIFER A , OD

Provider Gender: Female

License number: 14634

NPI: 1770921942

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female

License number: 33955

NPI: 1265927578

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female

License number: 33955

NPI: 1265927578

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-F 8AM-5PM

DYER, SHARON M , OD

Provider Gender: Female

License number: 33450

NPI: 1063866887

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

GABRIELIAN, ZARINE, OD

Provider Gender: Female
License number: 34133
NPI: 1083182398
Provider English Spoken: Yes

Provider Language(s) Spoken: Russian
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

GALLARDO, JANELLE, OD

Provider Gender: Female
License number: 34581
NPI: 1578171898
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

GILES, GREGORY E , OD

Provider Gender: Male
License number: 11362
NPI: 1114931250
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942-6434
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8AM-4PM, TU,TH 9AM-6PM, W 7AM-4PM, F 9AM-5PM, SA 8AM-1PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, French, Spanish
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

HAIGHT, BRUCE T , MD
Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

HAIGHT, BRUCE T , MD
Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

HAMOUIE, JUDY, OD
Provider Gender: Female
License number: 34984
NPI: 1518638287
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HAN, SULKI, OD

Provider Gender: Female
License number: 34171
NPI: 1750802195
Provider English Spoken: Yes
Provider Language(s) Spoken: Korean
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HIXSON, THOMAS M , OD

Provider Gender: Male
License number: 7490
NPI: 1528072683
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942-6434

Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 8AM-4PM, TU,TH 9AM-6PM, W 7AM-4PM, F 9AM-5PM, SA 8AM-1PM

HSU, CHRISTOPHER, MD

Provider Gender: Male
License number: A65973
NPI: 1336167618
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8AM-5PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HUDSON, HENRY L , MD

Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

HUNG, JANICE, OD

Provider Gender: Female
License number: 34296
NPI: 1750917936
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male

License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

KATZMAN, LEE R , MD

Provider Gender: Male
License number: A135673
NPI: 1912297284
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

KIM, HEAWON, OD

Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

KIM, HEAWON, OD

Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

KIM, MELODY J , OD
Provider Gender: Female
License number: 14726
NPI: 1487082749
Provider English Spoken: Yes
Provider Language(s) Spoken:
Korean, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

LEE, JENNIFER A , OD
Provider Gender: Female
License number: 33443
NPI: 1891147351
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

LEE, SALLY S , DO
Provider Gender: Female
License number: A8088
NPI: 1457468514
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
SAN DIEGO EYE
PROFESSIONALS

5965 SEVERIN DR
LA MESA, CA 91942-3806
Phone: (619) 583-4295
Fax: (619) 825-7300
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Chinese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 10AM-5PM

LEVY, PHILLIP A , OD
Provider Gender: Male
License number: 4884
NPI: 1528189115
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
PHILLIP A LEVY OD
5020 BALTIMORE DR STE B
LA MESA, CA 91942-0692
Phone: (619) 464-8303
Fax: (619) 464-4971
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

*Hours: M,F 10AM-5PM, TU-TH
9AM-6PM*

LE, HELEN W , OD

*Provider Gender: Female
License number: 33767
NPI: 1669995916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM*

MANCILLA, RAUL A , OD

*Provider Gender: Male
License number: 12705
NPI: 1487706198
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:*

*Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM*

MAO, KATHY, OD

*Provider Gender: Female
License number: 33828
NPI: 1053830158
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM*

MCGRAW, JOSEPH, MD

Provider Gender: Male

*License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM*

MCGRAW, JOSEPH, MD

*Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish*

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

MERALI, MURTAZA, OD

Provider Gender: Female
License number: 14558
NPI: 1972944189
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

MILLER, DOUGLAS G , MD

Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes

Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

NEWMAN, DAVID M , OD

Provider Gender: Male
License number: 7296
NPI: 1508856378
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken:
Cultural Competency: Yes
DAVID M NEWMAN OD
5642 LAKE MURRAY BLVD
LA MESA, CA 91942-1929
Phone: (619) 589-6263
Fax: (619) 589-6264
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-6PM, SA
10AM-5PM

NGUYEN, MEGGIE, OD
Provider Gender: Female
License number: 15342
NPI: 1649552548
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

NGUYEN, THY T , OD
Provider Gender: Female
License number: 12746
NPI: 1750490413
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

OU, JOCELYN, OD
Provider Gender: Female
License number: 34063
NPI: 1225518996
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ALVARADO EYE ASSOCIATES
MED CLINIC INC
7877 PARKWAY DR STE 100

LA MESA, CA 91942-2000
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

PANDYA, BHUMIKA, OD
Provider Gender: Female
License number: 35025
NPI: 1063182822
Provider English Spoken: Yes
Provider Language(s) Spoken:
Hindi
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Hours: M-F 8AM-5PM

PATEL, GITANE, MD

Provider Gender: Male

License number: A108603

NPI: 1710171434

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8AM-5PM

PATEL, SARJAN H , MD

Provider Gender: Male

License number: A114976

NPI: 1316199326

Provider English Spoken: Yes

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Yes

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942-7435

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-F 8AM-5PM

PETERSON, STEVEN G , OD

Provider Gender: Male

License number: 7554

NPI: 1659331320

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

20/20 VISION

7090 PARKWAY DR STE A

LA MESA, CA 91942-1596

Phone: (619) 460-2020

Fax: (619) 713-0369

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M,F 9AM-6PM, TU,TH 9AM-7PM, W 8AM-5PM, SA 9AM-12:30PM

PETERS, JAMIE S , OD

Provider Gender: Female

License number: 10724

NPI: 1073691077

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

VISION SOLUTIONS

OPTOMETRY

8235 UNIVERSITY AVE

LA MESA, CA 91942-9326

Phone: (619) 461-4913

Fax: (888) 509-6483

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL):

No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M,TU 9AM-5:30PM, W 8AM-5PM, TH 9AM-6PM, F 8AM-1PM

PRABHU, SUJATA P , MD

Provider Gender: Female

License number: A115965

NPI: 1982872552

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: Yes

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GRSMNT CTR DR STE 551

LA MESA, CA 91942-3078

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

PRABHU, SUJATA P , MD
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 8AM-5PM
QUACH, PHUC, OD
Provider Gender: Male
License number: 12891
NPI: 1770617805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

RICE, LAWRENCE S , MD
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

RICE, LAWRENCE S , MD
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE
551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

SAMUEL, MICHAEL A , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Male
License number: A83237
NPI: 1730175670
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE
 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8AM-5PM

SCOTT, JEFFREY I , OD

Provider Gender: Male
License number: 34978
NPI: 1568813434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

TAUTGES, BENJAMIN, OD

Provider Gender: Male
License number: 33945
NPI: 1225527153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

TILLMAN, SYLVIA, OD

Provider Gender: Female
License number: 9726
NPI: 1174730824
Provider English Spoken: Yes

Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 8AM-5PM

TON-NU, MY LINH, OD

Provider Gender: Female
License number: 34990
NPI: 1245733476
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

TONNU, ANH T , OD

Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

TORRES, ALVARO, OD

Provider Gender: Male
License number: 34322
NPI: 1932754637
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J

LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

TRAN, HENRY V , OD

Provider Gender: Male
License number: 15159
NPI: 1467846709
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes

Hours: M-F 8AM-5PM

TSUI, NANCY, OD

Provider Gender: Female
License number: 33944
NPI: 1841785037
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 8AM-5PM

TU, BEVERLY, OD

Provider Gender: Female
License number: 34108
NPI: 1053892794
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

VANICHSARN, KRYSTAL T , OD

Provider Gender: Female
License number: 15449
NPI: 1962886283
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

VINH, JOHN B , OD

Provider Gender: Male

License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

WASSERSTROM, JEFFREY P , MD

Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GRSMNT CTR DR STE 551
 LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

WILLEY, MELISSA M , OD

Provider Gender: Female
License number: 14415
NPI: 1679836928
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Cultural Competency: Yes
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

WONG, SHARON A , OD

Provider Gender: Female
License number: 15137

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1497159552
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

YEGHIAZARIAN, MARK, OD

Provider Gender: Male
License number: 34021
NPI: 1356829691
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
20/20 VISION
7090 PARKWAY DR STE A
LA MESA, CA 91942-1596
Phone: (619) 460-2020
Fax: (619) 713-0369
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,F 9AM-6PM, TU,TH 9AM-7PM, W 8AM-5PM, SA 9AM-12:30PM

YOUNG, JESSICA W , OD

Provider Gender: Female
License number: 33903
NPI: 1043565435
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

ZVANUT, DONALD R , OD

Provider Gender: Male
License number: 8642
NPI: 1336211804
Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GRSMNT CTR DR STE 551
LA MESA, CA 91942-3078
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM

ZVANUT, DONALD R , OD

Provider Gender: Male
License number: 8642
NPI: 1336211804
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942-7435
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

LAKESIDE

FLEMING, JOHN C , OD

Provider Gender: Male
License number: 8461
NPI: 1033192133
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
JOHN C FLEMING OD
9710 WINTER GARDENS BLVD
STE A
LAKESIDE, CA 92040-3866
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,TU,TH 9AM-5PM, W 9AM-6PM, F 8:30AM-4PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male
License number: 15100
NPI: 1568861425
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: Yes
JOHN C FLEMING OD
9710 WINTER GARDENS BLVD
STE A
LAKESIDE, CA 92040-3866
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,TU,TH 9AM-5PM, W 9AM-6PM, F 8:30AM-4PM

LEMON GROVE

HUANG, FLORA, OD

Provider Gender: Female
License number: 34082
NPI: 1487137105
Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: Yes
LEMON GROVE OPTOMETRY
7850 BROADWAY
LEMON GROVE, CA
91945-1801
Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU,TH 9AM-6PM, W,F 8AM-5PM, SA 8AM-1PM

WESLING, PAUL J , OD

Provider Gender: Male
License number: 10869
NPI: 1932130648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
LEMON GROVE OPTOMETRY
7850 BROADWAY
LEMON GROVE, CA
91945-1801
Phone: (619) 697-2020
Fax: (619) 697-0728
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU,TH 9AM-6PM, W,F 8AM-5PM, SA 8AM-1PM

NATIONAL CITY

AOTO, KIM N , OD

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

BINDER, NICHOLAS, MD
Provider Gender: Male

License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

CHENG, PATTY L, OD
Provider Gender: Female
License number: 12249
NPI: 1265526263
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

CULAS, FLORENA, OD

Provider Gender: Female
License number: 34498
NPI: 1346874971
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
KEDDINGTON & KALRA OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
 8:30AM-5PM, F 8AM-5PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License number: A134761
NPI: 1477879823
Provider English Spoken: Yes
Provider Language(s) Spoken:
 German, French, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
 8:30AM-5PM, F 8AM-5PM

HAIGHT, BRUCE T, MD
Provider Gender: Male
License number: G41117
NPI: 1427029628
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
 8:30AM-5PM, F 8AM-5PM

HUDSON, HENRY L, MD
Provider Gender: Male

License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
 Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
 8:30AM-5PM, F 8AM-5PM

HUNG, JANICE, OD
Provider Gender: Female
License number: 34296
NPI: 1750917936
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

KALRA, ANKUR, OD

Provider Gender: Male
License number: 11898
NPI: 1124195789
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: Yes
 KEDDINGTON & KALRA OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

KEDDINGTON, JOAN, OD

Provider Gender: Female
License number: 6263
NPI: 1992872691
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 KEDDINGTON & KALRA OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

KIM, HEAWON, OD

Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

KIM, HEAWON, OD

Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

KING, MARY M , OD

Provider Gender: Female
License number: 13711
NPI: 1578792107
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
 KEDDINGTON & KALRA
 OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613

Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

LEE, AUSTIN T , OD

Provider Gender: Male
License number: 14519
NPI: 1922356914
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 VIVE OPTOMETRY
 1033 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-3515
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): Yes
Hours: M,TU 10AM-5PM, W-F 9:30AM-5PM

LEE, RACHEL J , OD

Provider Gender: Female
License number: 14986
NPI: 1619379278
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 KEDDINGTON & KALRA
 OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

MARLAY, GREG L , OD

Provider Gender: Male
License number: 6998
NPI: 1306903083
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 MARLAY ENTERPRISES
 1132 E PLAZA BLVD STE 201

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

NATIONAL CITY, CA
91950-3560
Phone: (619) 477-4166
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,F 10AM-6PM, SA
10AM-2PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W
8:30AM-5PM, F 8AM-5PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 8:30AM-5PM, SA
8:30AM-3PM

MENDOZA, MARLON, OD
Provider Gender: Male
License number: 34896
NPI: 1578233359
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
KEDDINGTON & KALRA
OPTOMETRISTS APC

1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: SU 10AM-4PM, M-F
9AM-6PM, SA 9AM-5PM

**MENDOZA, RAYMUNDO G ,
OD**
Provider Gender: Male
License number: 8150
NPI: 1306837760
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
NATIONAL CITY EYECARE
2403 E PLAZA BLVD
NATIONAL CITY, CA
91950-5101
Phone: (619) 475-2184
Fax: (619) 475-3917
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,TU,TH,F 10AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes

Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

PRABHU, SUJATA P , MD

Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

RICE, LAWRENCE S , MD
Provider Gender: Male
License number: C31021
NPI: 1922060805
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
 NATIONAL CITY, CA
 91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

SCOTT, JEFFREY I , OD
Provider Gender: Male
License number: 34978
NPI: 1568813434
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA
 91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

TAN, JOCELYN, OD
Provider Gender: Female
License number: 33985
NPI: 1053724112
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: Yes
KEDDINGTON & KALRA OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

THAI, AMANDA, OD
Provider Gender: Female
License number: 34861
NPI: 1457928558
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
KEDDINGTON & KALRA OPTOMETRISTS APC
 1481 E PLAZA BLVD
 NATIONAL CITY, CA
 91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Arabic, Japanese, Spanish
Min/Max Age:

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
 Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

THAI, EMILY, OD

Provider Gender: Female
License number: 34649
NPI: 1720699432
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
KEDDINGTON & KALRA OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male
License number: 33758

NPI: 1740701481
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: Yes
KEDDINGTON & KALRA OPTOMETRISTS APC
1481 E PLAZA BLVD
NATIONAL CITY, CA
91950-3613
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Japanese, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: SU 10AM-4PM, M-F 9AM-6PM, SA 9AM-5PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA
91950-5164
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8:30AM-5PM, SA 8:30AM-3PM

VINH, JOHN B , OD

Provider Gender: Male
License number: 14177
NPI: 1003102724
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

WASSERSTROM, JEFFREY P , MD

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Gender: Male
License number: G54813
NPI: 1710922687
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA
91950-2973
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Arabic, Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 8AM-6PM, W 8:30AM-5PM, F 8AM-5PM

WU, EVA Y , OD
Provider Gender: Female
License number: 14743
NPI: 1073954442
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA
91950-3515
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU 10AM-5PM, W-F 9:30AM-5PM

OCEANSIDE

RING, ROBERT A , OD
Provider Gender: Male
License number: 6781
NPI: 1336228840
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
ROBERT A RING OD
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056-4515
Phone: (760) 726-9383
Fax: (760) 726-9897
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M 10AM-6PM, W 9AM-5PM, F 9AM-12PM

ROSA, ADAM, OD
Provider Gender: Male
License number: 34093
NPI: 1295250264
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
NORTH COAST OPTOMETRY
3915 MISSION AVE STE 2
OCEANSIDE, CA 92058-7801
Phone: (760) 757-8771
Fax:
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TU,TH 9AM-6PM, W 10AM-7PM, F 9AM-5PM

RAMONA

HOMESLEY, SUSAN D , OD
Provider Gender: Female
License number: 6693
NPI: 1720068984
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
SUSAN D HOMESLEY OD
1516 MAIN ST STE 102
RAMONA, CA 92065-5242

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (760) 789-0950
Fax: (760) 789-6057
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM, SA 8AM-11AM

SAN DIEGO

ADAMS, MONA N , OD
Provider Gender: Female
License number: 14457
NPI: 1942564521
Provider English Spoken: Yes
Provider Language(s) Spoken: RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M-F 7AM-5PM
AOTO, KIM N , OD
Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

AOTO, KIM N , OD
Provider Gender: Female
License number: 14524
NPI: 1780935650
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737

Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

AVALLONE, THOMAS, MD
Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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K. Directorio de proveedores de atención de la vista - Servicios de la vista

8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

AVALLONE, THOMAS, MD

Provider Gender: Male
License number: A147199
NPI: 1679865950
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

BANSAL, PREETI, MD

Provider Gender: Female
License number: A90890
NPI: 1871664631
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7AM-5PM

BHATIA, SHAGUN, MD

Provider Gender: Female
License number: A154902
NPI: 1104237353
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M-F 7AM-5PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License number: A124698
NPI: 1306076716
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

BOECK, CARL A , OD

Provider Gender: Male

License number: 6620

NPI: 1588656151

Provider English Spoken: Yes

Provider Language(s) Spoken: German, Spanish

Cultural Competency: Yes
ACKROYD AND VAN HOOSE
OPTOMETRY

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111-1007

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M,F 8AM-5PM, TU-TH 9AM-6PM

CHEN, LESLIE L , OD

Provider Gender: Female

License number: 12792

NPI: 1508953332

Provider English Spoken: Yes

Provider Language(s) Spoken: Chinese

Cultural Competency: Yes
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105-1731

Phone: (619) 521-2020

Fax: (619) 521-2025

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish, Vietnamese, Chinese

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M-W,F 9AM-5PM, TH 9AM-1:30PM, SA 9AM-1PM

CHINN, JENNIFER, OD

Provider Gender: Female

License number: 15407

NPI: 1073989471

Provider English Spoken: Yes

Provider Language(s) Spoken: Cultural Competency: Yes

STEPHEN CHINN OD
2856 UNIVERSITY AVE
SAN DIEGO, CA 92104-2930

Phone: (619) 280-0664

Fax: (619) 294-8100

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Lao, Spanish, Vietnamese, Chinese

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-W,F 10AM-6PM, TH 10AM-4PM, SA 9AM-1PM

CHINN, STEPHEN, OD

Provider Gender: Male

License number: 5373

NPI: 1912976291

Provider English Spoken: Yes

Provider Language(s) Spoken: Lao, Spanish, Vietnamese

Cultural Competency: Yes
STEPHEN CHINN OD

2856 UNIVERSITY AVE
SAN DIEGO, CA 92104-2930

Phone: (619) 280-0664

Fax: (619) 294-8100

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Lao, Spanish, Vietnamese, Chinese

Min/Max Age:

Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No

Please contact provider for Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M-W,F 10AM-6PM, TH 10AM-4PM, SA 9AM-1PM

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

COLEMAN, BROOKE A , OD

Provider Gender: Female
License number: 13551
NPI: 1700040748
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYELUX OPTOMETRY
 16615 DOVE CANYON RD STE 105
 SAN DIEGO, CA 92127-3441
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM, SA 8:30AM-2PM

COOPER, MICHAEL J , OD

Provider Gender: Male
License number: 10476
NPI: 1164586244
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
EYELUX OPTOMETRY
 16615 DOVE CANYON RD STE 105
 SAN DIEGO, CA 92127-3441
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone:
Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 8AM-5PM, SA 8:30AM-2PM

DAVIS, JADE, OD

Provider Gender: Female
License number: 11765
NPI: 1457303398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
OPTOM-EYES VISION CARE OPTOMETRY
 5638 MISSION CENTER RD STE 103
 SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5:30PM, SA 9AM-3PM

DAVIS, JADE, OD

Provider Gender: Female
License number: 11765
NPI: 1457303398
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

DEAN, MOENA, OD

Provider Gender: Female
License number: 33955
NPI: 1265927578
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

DUONG, CHERYL, OD

Provider Gender: Female
License number: OPT34070
NPI: 1366935678
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 EYELUX OPTOMETRY
 16615 DOVE CANYON RD STE
 105
 SAN DIEGO, CA 92127-3441
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 8AM-5PM, SA
 8:30AM-2PM

DUONG, KIM S , OD

Provider Gender: Female

License number: 34222
NPI: 1114448651
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
 RADY CHILDRENS
 SPECIALISTS
 7910 FROST ST STE 200
 SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M-F 7AM-5PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender

Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M 10AM-6PM, TU
 8:30AM-5PM, W 7:30AM-4PM,
 TH 9:30AM-5PM, F 8AM-4PM

DYER, SHARON M , OD

Provider Gender: Female
License number: 33450
NPI: 1063866887
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
 No
 Please contact provider for
 Accessibility information
*Public transportation (within 1/2
 mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
 8AM-5PM, W 8:30AM-5PM, TH
 8AM-6PM, F 8AM-4PM

GIANG, STEVEN, OD

Provider Gender: Male
License number: 34489
NPI: 1730710104
Provider English Spoken: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken:
Cultural Competency: Yes
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105-8537
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-5PM, SA
9AM-1PM

HOANG, KEVIN, OD
Provider Gender: Male
License number: 34401
NPI: 1790339216
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105-8537
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-5PM, SA
9AM-1PM

HOM, GREGORY G , OD
Provider Gender: Male
License number: 9694
NPI: 1154473916
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
GREGORY G HOM OD
11230 SORRENTO VALLEY RD
STE 145
SAN DIEGO, CA 92121-1338
Phone: (858) 535-9835
Fax: (858) 535-1266
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-TH 9AM-5PM, F
9AM-4PM

HUANG, FLORA, OD
Provider Gender: Female
License number: 34082
NPI: 1487137105
Provider English Spoken: Yes
Provider Language(s) Spoken:
Chinese

Cultural Competency: Yes
GOLDEN TRIANGLE
OPTOMETRY
4009 GOVERNOR DR
SAN DIEGO, CA 92122-2522
Phone: (858) 453-0444
Fax: (858) 453-0471
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 9AM-6PM

HUDSON, HENRY L , MD
Provider Gender: Male
License number: G76091
NPI: 1851349195
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

HUYNH, CHI T , OD

Provider Gender: Female
License number: 12901
NPI: 1922187426
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
CRYSTAL EYESITE OPTOMETRY
9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126-4810
Phone: (858) 547-3988
Fax: (844) 367-5161
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W 9:30AM-6PM, TH,F 10AM-6PM, SA 9AM-3PM

HUYNH, LOAN, OD

Provider Gender: Female
License number: 34472
NPI: 1003454604
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes

NORTH COUNTY OPTOMETRY
11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128-4609
Phone: (858) 674-1276
Fax: (858) 674-5863
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Tagalog
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M 9AM-5PM, TU 7AM-5PM, W,TH 10AM-7PM, F 10AM-5PM, SA 9AM-2PM

HUYNH, PAUL D , MD

Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
ADVANCED EYE AND LASER CTR OF CA INC
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105-8021
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

HUYNH, PAUL D , MD

Provider Gender: Male
License number: A79141
NPI: 1871577056
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
ADVANCED EYE AND LASER CTR OF CA INC
10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126-2370
Phone: (858) 549-3200
Fax: (858) 549-3207
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Tagalog, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Cultural Competency: Yes
WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

KATZMAN, BARRY, MD
Provider Gender: Male
License number: A34834
NPI: 1760473797
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No

Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

KHAN, FAHAD, MD
Provider Gender: Male
License number: A163142
NPI: 1548605843
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: Yes
VISION SPECIALISTS OF CALIFORNIA
 233 LEWIS ST
 SAN DIEGO, CA 92103-2122
Phone: (619) 501-9050
Fax: (619) 501-9054
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Bengali, Hindi, Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 8AM-4:30PM

KIM, HEAWON, OD
Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes

WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

KIM, HEAWON, OD
Provider Gender: Female
License number: 34584TLG
NPI: 1912517707
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

KLAREN, AMANDA, OD

Provider Gender: Female
License number: 12617
NPI: 1396876611
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 7AM-5PM

LARSEN, STEVEN R , OD

Provider Gender: Male
License number: 7687
NPI: 1629194782
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
UPTOWN OPTOMETRY
4096 PARK BLVD
SAN DIEGO, CA 92103-2620

Phone: (619) 291-5505
Fax: (619) 291-4404
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: TU-F 9AM-3PM, SA 10AM-2PM

LAU, JANICE L , OD

Provider Gender: Female
License number: 13037
NPI: 1952453300
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
SABRE SPRINGS OPTOMETRY
12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128-4114
Phone: (858) 748-1265
Fax: (844) 269-9527
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M,TU,TH 9AM-5PM, W,F 10AM-6PM

LAU, KUEN CHINE, OD

Provider Gender: Male
License number: 11166
NPI: 1821001645
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5:30PM, SA 9AM-3PM

LEE, JASON, OD

Provider Gender: Male
License number: 14881
NPI: 1679985584
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 7AM-5PM

LE, JACQUELIN M , OD
Provider Gender: Female
License number: 10962
NPI: 1487610432
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Yes
SAN DIEGO VISION CARE
OPTOMETRY
3807 FAIRMOUNT AVE STE
200
SAN DIEGO, CA 92105-2659
Phone: (619) 508-5678
Fax: (619) 501-0686
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9AM-5PM

LIN, HENRY C , OD
Provider Gender: Male
License number: 11368
NPI: 1861405664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
OPTOM-EYES VISION CARE
OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154-1012
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-F 9:30AM-6PM, SA
9AM-3PM

LIN, HENRY C , OD
Provider Gender: Male
License number: 11368
NPI: 1861405664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 9AM-5:30PM, SA
9AM-3PM

LIN, HENRY C , OD
Provider Gender: Male
License number: 11368
NPI: 1861405664
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Yes
FASHION VALLEY EYE CARE
OPTOMETR
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-SA 10AM-7PM

LLANES, BENJAMIN P , OD

Provider Gender: Male
License number: 8782
NPI: 1053309005
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish, Tagalog
Cultural Competency: Yes
SEE KLEER EYECARE
CENTER
9580 BLACK MOUNTAIN RD
STE J
SAN DIEGO, CA 92126-4522
Phone: (858) 536-8952
Fax: (858) 536-8951
After Hours Phone:

Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Tagalog
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-F 11AM-6PM, SA
9AM-1PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:

Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License number: A155228
NPI: 1588624852
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for

Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

MILLER, DOUGLAS G , MD

Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

MILLER, DOUGLAS G , MD

Provider Gender: Male
License number: G52627
NPI: 1982636031
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

MOLL, ANGELA, MD

Provider Gender: Female
License number: A105472
NPI: 1861648602
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M-F 7AM-5PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2

SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

NGUYEN, BRUCE C , OD

Provider Gender: Male
License number: 14156
NPI: 1376839019
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
FASHION VALLEY EYE CARE OPTOMETR
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.
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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

NGUYEN, BRUCE C , OD

Provider Gender: Male
License number: 14156
NPI: 1376839019
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
CLAIREMONT OPTOMETRY
9353 CLRMNT MESA BLVD
STE K2
SAN DIEGO, CA 92123-1220
Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-6PM, SA 9AM-3PM

NGUYEN, HOA PHUONG T , OD

Provider Gender: Female
License number: 12630
NPI: 1962439265
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes

COLLEGE GROVE
OPTOMETRY
4560 COLLEGE AVE
SAN DIEGO, CA 92115-4012
Phone: (619) 583-5744
Fax: (619) 582-6112
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-5PM

NGUYEN, JASMINE P , OD

Provider Gender: Female
License number: 11189
NPI: 1497896922
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105-8537
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-5PM, SA 9AM-1PM

NGUYEN, KELVIN H , OD

Provider Gender: Male
License number: 11085
NPI: 1518923572
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
SAN DIEGO VISION CARE
OPTOMETRY
3807 FAIRMOUNT AVE STE 200
SAN DIEGO, CA 92105-2659
Phone: (619) 508-5678
Fax: (619) 501-0686
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-5PM

NGUYEN, THANH T , OD

Provider Gender: Female
License number: 13126
NPI: 1992813323
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

SABRE SPRINGS OPTOMETRY No 12650 SABRE SPGS PKWY STE 203 SAN DIEGO, CA 92128-4114 Phone: (858) 748-1265 Fax: (844) 269-9527 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Vietnamese Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M,TU,TH 9AM-5PM, W,F 10AM-6PM	Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M-F 9AM-5PM, SA 9AM-1PM	<i>Cultural Competency: Yes</i> RADY CHILDRENS SPECIALISTS 7910 FROST ST STE 200 SAN DIEGO, CA 92123-2776 Phone: (858) 309-7702 Fax: (858) 966-8901 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): No Hours: M-F 7AM-5PM
NGUYEN, THANH T , OD Provider Gender: Female License number: 13126 NPI: 1992813323 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: Yes JASMINE P NGUYEN OD INC 4029 43RD ST STE 300 SAN DIEGO, CA 92105-8537 Phone: (619) 284-3937 Fax: (619) 284-3938 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Spanish, Vietnamese Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL):	NGUYEN, TRACY T , OD Provider Gender: Female License number: 10859 NPI: 1265596621 Provider English Spoken: Yes Provider Language(s) Spoken: Vietnamese Cultural Competency: Yes ESSENTIAL EYECARE OPTOMETRY 7612 LINDA VISTA RD STE 105 SAN DIEGO, CA 92111-5313 Phone: (858) 467-0655 Fax: After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Vietnamese Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information Public transportation (within 1/2 mile from Site): Yes Hours: M-W,F 11AM-3PM	PATEL, GITANE, MD Provider Gender: Male License number: A108603 NPI: 1710171434 Provider English Spoken: Yes Provider Language(s) Spoken: Cultural Competency: Yes WEST COAST EYE CARE 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111-3737 Phone: (858) 565-8822 Fax: (858) 565-2449 After Hours Phone: Accepting New Patients: Yes Site English Spoken: Yes Site Language(s) Spoken: Min/Max Age: Gender Restriction: No Gender Restrictions American Sign Language (ASL): No Please contact provider for Accessibility information
O HALLORAN, HENRY, MD Provider Gender: Male License number: A73282 NPI: 1235287947 Provider English Spoken: Yes Provider Language(s) Spoken: German, Spanish		

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Public transportation (within 1/2 mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

PATEL, GITANE, MD

Provider Gender: Male
License number: A108603
NPI: 1710171434
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 7:30AM-4:30PM, TU 8AM-5PM, W 8:30AM-5PM, TH 8AM-6PM, F 8AM-4PM

PATEL, SARJAN H , MD

Provider Gender: Male
License number: A114976
NPI: 1316199326
Provider English Spoken: Yes
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2

mile from Site): No
Hours: M 10AM-6PM, TU 8:30AM-5PM, W 7:30AM-4PM, TH 9:30AM-5PM, F 8AM-4PM

PHAM, TONY D , OD

Provider Gender: Male
License number: 12348
NPI: 1841271434
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: Yes
 MIRA MESA EYECARE
 6755 MIRA MESA BLVD STE 141
 SAN DIEGO, CA 92121-4311
Phone: (858) 535-8282
Fax: (858) 535-0537
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-6PM, SA 10AM-2PM

PHUNG, RICHARD N V, OD

Provider Gender: Male
License number: 9547
NPI: 1689661571
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese, Chinese
Cultural Competency: Yes
 SCRIPPS RANCH OPTOMETRI

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

CTR
9880 HIBERT ST STE E1
SAN DIEGO, CA 92131-1068
Phone: (858) 693-9044
Fax: (858) 693-0704
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M,W,TH 10AM-6PM, TU
10AM-2PM, F,SA 9AM-2PM

PHUNG, RICHARD N V, OD
Provider Gender: Male
License number: 9547
NPI: 1689661571
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese, Chinese
Cultural Competency: Yes
CITY HEIGHTS OPTOMETRY
4236 UNIVERSITY AVE
SAN DIEGO, CA 92105-1503
Phone: (619) 281-3422
Fax: (619) 281-1196
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No

Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M-F 10AM-5PM

POUSTI, SHEIVA L, OD
Provider Gender: Female
License number: 10403
NPI: 1730240052
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
SAN DIEGO EYE CLINIC
OPTOMETRY
3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105-3420
Phone: (619) 431-2020
Fax: (619) 376-2100
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): Yes
Hours: M-SU 9AM-6PM

PRABHU, SUJATA P, MD
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD

SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2
mile from Site): No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

PRABHU, SUJATA P, MD
Provider Gender: Female
License number: A115965
NPI: 1982872552
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish
Cultural Competency: Yes
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
Public transportation (within 1/2

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

mile from Site): No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

SCHER, COLIN A , MD

Provider Gender: Male
License number: A42700
NPI: 1396816153
Provider English Spoken: Yes
Provider Language(s) Spoken:
Spanish

Cultural Competency: Yes
RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123-2776

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Public transportation (within 1/2
mile from Site): No

Hours: M-F 7AM-5PM

SHULKIN, MITCHELL S , OD

Provider Gender: Male

License number: 8153

NPI: 1770531865

Provider English Spoken: Yes

Provider Language(s) Spoken:

Cultural Competency: Yes

NORTH COUNTY OPTOMETRY

11835 CARMEL MTN RD STE
1313

SAN DIEGO, CA 92128-4609

Phone: (858) 674-1276

Fax: (858) 674-5863

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Tagalog

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M 9AM-5PM, TU

7AM-5PM, W,TH 10AM-7PM, F

10AM-5PM, SA 9AM-2PM

SORIANO, CATHERINE F , OD

Provider Gender: Female

License number: 13109

NPI: 1508919085

Provider English Spoken: Yes

Provider Language(s) Spoken:

Filipino, Pilipino, Spanish,

Tagalog

Cultural Competency: Yes

CATHERINE SORIANO OD

2404 MADISON AVE

SAN DIEGO, CA 92116-2920

Phone: (619) 291-3836

Fax: (619) 291-4625

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Spanish, Tagalog

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 8:30AM-5PM

STEVENS, TANIA, OD

Provider Gender: Female

License number: 12072

NPI: 1427089630

Provider English Spoken: Yes

Provider Language(s) Spoken:
Spanish

Cultural Competency: Yes

OPTOMETRY CABANA

12925 EL CAMINO REAL STE
AA3

SAN DIEGO, CA 92130-1891

Phone: (858) 348-5900

Fax: (858) 617-0780

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Russian, Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for

Accessibility information

Public transportation (within 1/2
mile from Site): Yes

Hours: M-F 10AM-6PM, SA
9AM-3PM

TAM, MAY C , OD

Provider Gender: Female

License number: 11960

NPI: 1548255896

Provider English Spoken: Yes

Provider Language(s) Spoken:

Spanish

Cultural Competency: Yes

OPTOM-EYES VISION CARE

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Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

OPTOMETRY
 5638 MISSION CENTER RD
 STE 103
 SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5:30PM, SA 9AM-3PM

TAM, MAY C , OD
Provider Gender: Female
License number: 11960
NPI: 1548255896
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions

American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

TAM, MAY C , OD
Provider Gender: Female
License number: 11960
NPI: 1548255896
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Spanish
Cultural Competency: Yes
 OPTOM-EYES VISION CARE OPTOMETRY
 1555 PALM AVE STE A2
 SAN DIEGO, CA 92154-1012
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9:30AM-6PM, SA 9AM-3PM

TA, TRANG T , OD
Provider Gender: Female
License number: 12100
NPI: 1518381045
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese

Cultural Competency: Yes
 JASMINE P NGUYEN OD INC
 4029 43RD ST STE 300
 SAN DIEGO, CA 92105-8537
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-F 9AM-5PM, SA 9AM-1PM

TONNU, ANH T , OD
Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken:
 Vietnamese
Cultural Competency: Yes
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111-3737
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
 Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL):
 No

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 10AM-6PM, TU
8:30AM-5PM, W 7:30AM-4PM,
TH 9:30AM-5PM, F 8AM-4PM

TONNU, ANH T , OD

Provider Gender: Female
License number: 11318
NPI: 1679521280
Provider English Spoken: Yes
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Yes
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115-1754
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M 7:30AM-4:30PM, TU
8AM-5PM, W 8:30AM-5PM, TH
8AM-6PM, F 8AM-4PM

TRANG, CHAU H , OD

Provider Gender: Female
License number: 9556
NPI: 1073671087
Provider English Spoken: Yes
Provider Language(s) Spoken:
French, Spanish, Vietnamese,

Chinese
Cultural Competency: Yes
CHAU H TRANG OD
6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111-6363
Phone: (858) 495-0592
Fax: (858) 495-0560
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
French, Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,W 10AM-4PM, F
10AM-5:30PM, SA 9AM-1PM

TU, CHARLES, OD

Provider Gender: Male
License number: 34618
NPI: 1073137691
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
FASHION VALLEY EYE CARE
OPTOMETR
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M-SA 10AM-7PM

VAN HOOSE, PATRICK, OD

Provider Gender: Male
License number: 6576
NPI: 1811024516
Provider English Spoken: Yes
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Yes
ACKROYD AND VAN HOOSE
OPTOMETRY
7246 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92111-1007
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,F 8AM-5PM, TU-TH
9AM-6PM

VIVIRITO, MARY, OD

Provider Gender: Female
License number: 33798
NPI: 1477968667
Provider English Spoken: Yes

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557. Los servicios de intérpretes son brindados por el Plan; comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

K. Directorio de proveedores de atención de la vista - Servicios de la vista

Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
OPTOM-EYES VISION CARE OPTOMETRY
 5638 MISSION CENTER RD
 STE 103
 SAN DIEGO, CA 92108-4348
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-5:30PM, SA 9AM-3PM

VIVIRITO, MARY, OD

Provider Gender: Female
License number: 33798
NPI: 1477968667
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
FASHION VALLEY EYE CARE OPTOMETR
 7007 FRIARS RD STE 351
 SAN DIEGO, CA 92108-1148
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:

Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-SA 10AM-7PM

WESLING, PAUL J , OD

Provider Gender: Male
License number: 10869
NPI: 1932130648
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
GOLDEN TRIANGLE OPTOMETRY
 4009 GOVERNOR DR
 SAN DIEGO, CA 92122-2522
Phone: (858) 453-0444
Fax: (858) 453-0471
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM

YUEN, STEVEN T , OD

Provider Gender: Male
License number: 10454
NPI: 1447289814

Provider English Spoken: Yes
Provider Language(s) Spoken: Chinese
Cultural Competency: Yes
GOLDEN PLAZA OPTOMETRY
 7330 CLAIREMONT MESA BLVD # A1
 SAN DIEGO, CA 92111-1124
Phone: (858) 292-4498
Fax: (858) 292-0967
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Vietnamese, Chinese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
 Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M-W,F,SU 10AM-7PM, SA 10AM-7:30PM

YU, JEAN D , OD

Provider Gender: Female
License number: 11789
NPI: 1861531535
Provider English Spoken: Yes
Provider Language(s) Spoken: Tagalog, Chinese
Cultural Competency: Yes
NEOVISION OPTOMETRY
 8137 MIRA MESA BLVD
 SAN DIEGO, CA 92126-2601
Phone: (858) 689-9533
Fax: (858) 689-9515
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Tagalog, Chinese

Esta lista de proveedores de Blue Shield Promise puede cambiar en cualquier momento. Si desea obtener información actualizada, comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557.

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU,TH,SA 10AM-5PM, W,F 10AM-6PM

SAN MARCOS

SKAY, RICHARD M , OD
Provider Gender: Male
License number: 7649
NPI: 1639251945
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
RICHARD M SKAY OD
1903 W SAN MARCOS BLVD
STE 130
SAN MARCOS, CA 92078-3907
Phone: (760) 727-2211
Fax: (760) 727-2533
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-3PM

TA, MINI P , OD
Provider Gender: Female
License number: 15170

NPI: 1578955605
Provider English Spoken: Yes
Provider Language(s) Spoken: Cultural Competency: Yes
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078-1207
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU-F 9AM-5PM, SA 9AM-2PM

TRAN, MICHAEL D , OD
Provider Gender: Male
License number: 14530
NPI: 1649524216
Provider English Spoken: Yes
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Yes
NEW OPTIX OPTOMETRY
640 GRAND AVE STE 101
SAN MARCOS, CA 92078-1207
Phone: (760) 736-0020
Fax: (760) 736-0019
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish, Vietnamese
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: TU-F 9AM-5PM, SA 9AM-2PM

SANTEE

BOECK, CARL A , OD
Provider Gender: Male
License number: 6620
NPI: 1588656151
Provider English Spoken: Yes
Provider Language(s) Spoken: German, Spanish
Cultural Competency: Yes
DRS BOECK AND SCHISLER
OPTOMETRISTS
9621 MISSION GORGE RD STE 106
SANTEE, CA 92071-3802
Phone: (619) 449-2000
Fax: (619) 449-8303
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): Yes
Hours: M,TH,F 9AM-5PM, TU 2PM-6PM

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

SCHISLER, RONALD W , OD

Provider Gender: Male
License number: 6791
NPI: 1346378742
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
**DRS BOECK AND SCHISLER
OPTOMETRISTS**
9621 MISSION GORGE RD STE
106
SANTEE, CA 92071-3802
Phone: (619) 449-2000
Fax: (619) 449-8303
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Spanish
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* Yes
Hours: M,TH,F 9AM-5PM, TU
2PM-6PM

SPRING VALLEY

CUMMINS JR, JAMES W , OD

Provider Gender: Male
License number: 6016
NPI: 1568595791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JAMES W CUMMINS JR OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233

Phone: (619) 463-9318

Fax:

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL):
No

Please contact provider for
Accessibility information

*Public transportation (within 1/2
mile from Site):* No

Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
8:30AM-12PM

CUMMINS JR, JAMES W , OD

Provider Gender: Male
License number: 6016
NPI: 1568595791
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No

Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
9AM-12PM

FLEMING, JOHN C , OD

Provider Gender: Male
License number: 8461
NPI: 1033192133
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233
Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender
Restrictions
American Sign Language (ASL):
No
Please contact provider for
Accessibility information
*Public transportation (within 1/2
mile from Site):* No
Hours: M,W,TH 9AM-5PM, TU
9AM-5:30PM, F 9AM-4PM, SA
9AM-12PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male
License number: 15100
NPI: 1568861425
Provider English Spoken: Yes
Provider Language(s) Spoken:
Cultural Competency: Yes
JOHN C FLEMING OD
9628 CAMPO RD STE C
SPRING VALLEY, CA
91977-1233

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Phone: (619) 463-9318
Fax: (619) 463-9640
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken:
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M,W,TH 9AM-5PM, TU 9AM-5:30PM, F 9AM-4PM, SA 9AM-12PM

KALRA, ANKUR, OD

Provider Gender: Male
License number: 11898
NPI: 1124195789
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

KEDDINGTON, JOAN, OD

Provider Gender: Female
License number: 6263
NPI: 1992872691
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628

Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

KING, MARY M , OD

Provider Gender: Female
License number: 13711
NPI: 1578792107
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish

Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

MENDOZA, MARLON, OD

Provider Gender: Male
License number: 34896
NPI: 1578233359
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

THAI, AMANDA, OD

Provider Gender: Female
License number: 34861
NPI: 1457928558
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:

Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License number: 33758
NPI: 1740701481
Provider English Spoken: Yes
Provider Language(s) Spoken: Arabic
Cultural Competency: Yes
EYE CARE OPTOMETRY ASSOCIATES
687 SWEETWATER RD
SPRING VALLEY, CA
91977-5628
Phone: (619) 466-9444
Fax: (619) 466-9314
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M-F 9AM-6PM, SA 9AM-5PM

VALLEY CENTER

CRUZ, MICHELLE C , OD

Provider Gender: Female
License number: 33482
NPI: 1679926646
Provider English Spoken: Yes
Provider Language(s) Spoken: American Sign Language
Cultural Competency: Yes
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA
92082-6553

Phone: (760) 751-8771
Fax: (760) 751-8772
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for Accessibility information
Public transportation (within 1/2 mile from Site): No
Hours: M 9AM-6PM, TU-F 9AM-5PM

JOYCE, ROBERT J , OD

Provider Gender: Male
License number: 11833
NPI: 1275585127
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: Yes
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA
92082-6553
Phone: (760) 751-8771
Fax: (760) 751-8772
After Hours Phone:
Accepting New Patients: Yes
Site English Spoken: Yes
Site Language(s) Spoken: Spanish
Min/Max Age:
Gender Restriction: No Gender Restrictions
American Sign Language (ASL): No
Please contact provider for

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K. Directorio de proveedores de atención de la vista - Servicios de la vista

Accessibility information

Public transportation (within 1/2 mile from Site): No

Hours: M 9AM-6PM, TU-F 9AM-5PM

VISTA

DEMLINGER, GLENN M , OD

Provider Gender: Male

License number: 8954

NPI: 1508932518

Provider English Spoken: Yes

Provider Language(s) Spoken: Spanish

Cultural Competency: Yes

SHADOWRIDGE FAMILY
VISION

741 SHADOWRIDGE DR

VISTA, CA 92083-7997

Phone: (760) 727-1844

Fax: (760) 727-3044

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M,TU,TH 9AM-6PM, W 7AM-5PM

GEORGE, BRUCE D , OD

Provider Gender: Male

License number: 7696

NPI: 1356414551

Provider English Spoken: Yes

Provider Language(s) Spoken:

Korean, Spanish

Cultural Competency: Yes

BRUCE D GEORGE OD

931 ANZA AVE STE B

VISTA, CA 92084-4531

Phone: (760) 758-2340

Fax: (760) 867-2222

After Hours Phone:

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken: Spanish

Min/Max Age:

Gender Restriction: No Gender
Restrictions

American Sign Language (ASL): No

Please contact provider for

Accessibility information

Public transportation (within 1/2 mile from Site): Yes

Hours: M,TH,F 9AM-5PM, TU,W 9AM-6PM

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L. Lista de médicos de atención primaria

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		Bernardo, Rachelle A	352
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		Bortner, Adam C	232
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Celestin-ramsey, Akanke J	205	Collins, William M	235		
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Chait Llamas, Lwbba G	375	Cordes, William D	307		
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601 Potrero Grande Drive
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